

**TITLE V BLOCK GRANT APPLICATION**  
**FORMS (2-21)**  
**STATE: OK**  
**APPLICATION YEAR: 2010**

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**FORM 2**  
**MCH BUDGET DETAILS FOR FY 2010**

*[Secs. 504 (d) and 505(a)(3)(4)]*

**STATE: OK**

**1. FEDERAL ALLOCATION**

(Item 15a of the Application Face Sheet [SF 424])

Of the Federal Allocation (1 above), the amount earmarked for:

A.Preventive and primary care for children:

\$ 3,094,174 ( 42.66%)

B.Children with special health care needs:

\$ 2,176,096 ( 30%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 725,365 ( 10%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

**2. UNOBLIGATED BALANCE** (Item 15b of SF 424)

\$ 0

**3. STATE MCH FUNDS** (Item 15c of the SF 424)

\$ 5,500,846

**4. LOCAL MCH FUNDS** (Item 15d of SF 424)

\$ 0

**5. OTHER FUNDS** (Item 15e of SF 424)

\$ 0

**6. PROGRAM INCOME** (Item 15f of SF 424)

\$ 105,413

**7. TOTAL STATE MATCH** (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 4,684,317

\$ 5,606,259

**8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)**

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 12,859,913

**9. OTHER FEDERAL FUNDS**

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 94,644

c. CISS: \$ 0

d. Abstinence Education: \$ 0

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 0

h. AIDS: \$ 0

i. CDC: \$ 128,172

j. Education: \$ 48,635

k. Other: \$ 0

ECCS \$ 105,000

Family Planning \$ 4,416,878

**10. OTHER FEDERAL FUNDS** (SUBTOTAL of all Funds under item 9)

\$ 4,793,329

**11. STATE MCH BUDGET TOTAL**

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 17,653,242

**FORM NOTES FOR FORM 2**

None

**FIELD LEVEL NOTES**

None

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: OK**

	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 7,791,761	\$ 7,743,394	\$ 7,743,394	\$ 7,399,286	\$ 7,399,286	\$ 7,401,402
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 6,331,072	\$ 6,744,445	\$ 5,990,967	\$ 8,155,051	\$ 6,070,001	\$ 9,058,909
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 644,638	\$ 4,533,915	\$ 2,870,077	\$ 5,532,483	\$ 4,080,523	\$ 5,417,667
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 165,000	\$ 132,511	\$ 202,397	\$ 128,601	\$ 132,511	\$ 128,367
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 14,932,471	\$ 19,154,265	\$ 16,806,835	\$ 21,215,421	\$ 17,682,321	\$ 22,006,345
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 2,845,221	\$ 2,893,184	\$ 2,993,184	\$ 4,140,190	\$ 4,217,558	\$ 4,217,558
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 17,777,692	\$ 22,047,449	\$ 19,800,019	\$ 25,355,611	\$ 21,899,879	\$ 26,223,903
(STATE MCH BUDGET TOTAL)						

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: OK**

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 7,399,286	\$ 7,253,654	\$ 7,401,402		\$ 7,253,654	
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0		\$ 0	
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 7,839,545	\$ 8,410,253	\$ 5,611,170		\$ 5,500,846	
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 4,979,235	\$ 5,761,093	\$ 0		\$ 0	
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0		\$ 0	
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 116,448	\$ 114,965	\$ 128,367		\$ 105,413	
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 20,334,514	\$ 21,539,965	\$ 13,140,939	\$ 0	\$ 12,859,913	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 4,272,922	\$ 4,272,922	\$ 4,434,656		\$ 4,793,329	
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 24,607,436	\$ 25,812,887	\$ 17,575,595	\$ 0	\$ 17,653,242	\$ 0
(STATE MCH BUDGET TOTAL)						

## FORM NOTES FOR FORM 3

None

### FIELD LEVEL NOTES

1. **Section Number:** Form3\_Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**

Figures reported often indicate differences between budgeted and expended columns due to the time factor associated with submission of estimated budgeted amounts in ERP for an application period versus what eventually occurs in agency expenses once that projected period is reflected in the annual report two years hence. This figure represents increased efforts in service provision as well as additional state dollars for personnel costs infused into the system due to mandated legislative salary increases.

2. **Section Number:** Form3\_Main  
**Field Name:** LocalMCHFundsExpended  
**Row Name:** Local MCH Funds  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**

Figures reported often indicate differences between budgeted and expended columns due to the time factor associated with submission of estimated budgeted amounts in ERP for an application period versus what eventually occurs in agency expenses once that projected period is reflected in the annual report two years hence. This figure represents continued additional reported expenditures through local initiatives by contracted providers as well as county health departments. These monies should be considered soft monies and not counted on at this level in subsequent years as an absolute commitment.

3. **Section Number:** Form3\_Main  
**Field Name:** LocalMCHFundsExpended  
**Row Name:** Local MCH Funds  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**

Figures reported often indicate differences between budgeted and expended columns due to the time factor associated with submission of estimated budgeted amounts in ERP for an application period versus what eventually occurs in agency expenses once that projected period is reflected in the annual report two years hence. This figure represents continued additional reported expenditures through local initiatives by contracted providers as well as county health departments. These monies should be considered soft monies and not counted on at this level in subsequent years as an absolute commitment.

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: OK**

	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 3,955,767	\$ 4,439,413	\$ 4,094,739	\$ 4,592,513	\$ 4,042,637	\$ 5,902,376
b. Infants < 1 year old	\$ 1,669,308	\$ 3,103,857	\$ 2,129,481	\$ 3,398,287	\$ 2,854,960	\$ 2,709,536
c. Children 1 to 22 years old	\$ 3,350,494	\$ 5,832,603	\$ 5,176,678	\$ 7,761,596	\$ 5,316,613	\$ 7,840,093
d. Children with Special Healthcare Needs	\$ 4,090,480	\$ 4,065,282	\$ 4,065,282	\$ 3,894,732	\$ 3,884,625	\$ 3,895,473
e. Others	\$ 440,035	\$ 251,075	\$ 0	\$ 0	\$ 229,270	\$ 0
f. Administration	\$ 1,426,387	\$ 1,462,035	\$ 1,340,655	\$ 1,568,293	\$ 1,354,216	\$ 1,658,867
g. SUBTOTAL	\$ 14,932,471	\$ 19,154,265	\$ 16,806,835	\$ 21,215,421	\$ 17,682,321	\$ 22,006,345
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 0		\$ 0		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 130,802		\$ 126,000		\$ 134,700	
j. Education	\$ 25,000		\$ 25,000		\$ 35,000	
k. Other						
Dept. of Mental Hlth	\$ 0		\$ 0		\$ 70,000	
Family Planning	\$ 2,489,419		\$ 2,642,184		\$ 3,740,858	
MCHB ECCS	\$ 0		\$ 0		\$ 137,000	
MCHB	\$ 100,000		\$ 100,000		\$ 0	
<b>III. SUBTOTAL</b>	\$ 2,845,221		\$ 2,993,184		\$ 4,217,558	

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: OK**

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 4,417,762	\$ 5,726,011	\$ 2,914,741		\$ 2,826,977	
b. Infants < 1 year old	\$ 3,198,979	\$ 2,606,691	\$ 1,338,037		\$ 1,286,944	
c. Children 1 to 22 years old	\$ 7,357,874	\$ 7,811,663	\$ 3,871,635		\$ 3,856,679	
d. Children with Special Healthcare Needs	\$ 3,884,819	\$ 3,817,713	\$ 3,895,474		\$ 3,817,713	
e. Others	\$ 0	\$ 0	\$ 0		\$ 0	
f. Administration	\$ 1,475,080	\$ 1,577,887	\$ 1,121,052		\$ 1,071,600	
g. SUBTOTAL	\$ 20,334,514	\$ 21,539,965	\$ 13,140,939	\$ 0	\$ 12,859,913	\$ 0
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 94,644		\$ 94,644		\$ 94,644	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 0		\$ 0		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 137,400		\$ 132,827		\$ 128,172	
j. Education	\$ 35,000		\$ 48,635		\$ 48,635	
k. Other						
ECCS	\$ 0		\$ 142,692		\$ 105,000	
Family Planning	\$ 3,865,878		\$ 4,015,858		\$ 4,416,878	
MCH ECCS	\$ 140,000		\$ 0		\$ 0	
<b>III. SUBTOTAL</b>	\$ 4,272,922		\$ 4,434,656		\$ 4,793,329	



## FORM NOTES FOR FORM 4

None

### FIELD LEVEL NOTES

- 1. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** PregWomenExpended  
**Row Name:** Pregnant Women  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
This increase is partially due to shifting resources within the direct services area. Additionally, available state appropriated and local funding for the 2008 grant year was greater than anticipated and allowed for increased program effort and larger expenditure than was projected in the 2008 application.
- 2. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** PregWomenExpended  
**Row Name:** Pregnant Women  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
This increase is partially due to shifting resources within the direct services area. Additionally, available state appropriated and local funding for the 2007 grant year was much greater than anticipated and allowed for increased program effort and larger expenditure than was projected in the 2007 application.
- 3. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_0\_1Expended  
**Row Name:** Infants <1 year old  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
This decrease is partially due to shifting resources within the direct services area. These available state appropriated and local funds were prioritized to gap fill in the direct service area as other monies previously available dissipated.
- 4. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_1\_22Expended  
**Row Name:** Children 1 to 22 years old  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
This increase is partially due to shifting resources within the direct services area. Additionally, available state appropriated and local funding for the 2007 grant year was much greater than anticipated and allowed for increased program effort and larger expenditure than was projected in the 2007 application.
- 5. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
This line represented Title X Family Planning dollars that were planned to be budgeted directly within Title V scope of operations and budgets for the federal fiscal 2007 year. However, due to shifting priorities and reduced resources within the Title X grant, these monies were utilized for other Title X requirements.
- 6. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Figures reported in ERP often indicate differences between budgeted and expended columns due to the time factor associated with submission of estimated budgeted amounts in ERP for an application period versus what eventually occurs in agency expenses once that projected period is reflected in the annual report two years hence. This figure represents state appropriated funding and expenditure increases during the 2007 grant year that were more than anticipated and allowed for larger expenditure than was projected in the 2007 application.

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: OK**

TYPE OF SERVICE	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 7,648,748	\$ 10,371,297	\$ 8,908,234	\$ 9,733,152	\$ 9,361,381	\$ 10,518,154
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 1,519,660	\$ 2,005,743	\$ 1,687,941	\$ 2,077,773	\$ 1,843,581	\$ 1,592,575
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,119,476	\$ 1,786,410	\$ 2,084,108	\$ 3,448,032	\$ 1,534,175	\$ 3,633,545
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 4,644,587	\$ 4,990,815	\$ 4,126,552	\$ 5,956,464	\$ 4,943,184	\$ 6,262,071
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 14,932,471	\$ 19,154,265	\$ 16,806,835	\$ 21,215,421	\$ 17,682,321	\$ 22,006,345

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: OK**

TYPE OF SERVICE	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 8,680,335	\$ 9,626,349	\$ 6,622,185	\$	\$ 5,800,981	\$
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 1,921,680	\$ 1,513,999	\$ 903,676	\$	\$ 858,935	\$
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 3,789,184	\$ 3,661,724	\$ 2,061,786	\$	\$ 2,377,400	\$
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 5,943,315	\$ 6,737,893	\$ 3,553,292	\$	\$ 3,822,597	\$
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 20,334,514	\$ 21,539,965	\$ 13,140,939	\$ 0	\$ 12,859,913	\$ 0

## FORM NOTES FOR FORM 5

None

### FIELD LEVEL NOTES

- 1. Section Number:** Form5\_Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
All areas of MCH Block dollars, (A) Maternal and Infant Care, (B) Preventative and Primary Care for Children, and (C) Children with Special Health Care Needs, are committed to continue a realignment of resources towards core infrastructure, population based, and enabling services. This increase in direct services, however, is partially due to increased overall funding availability and needs to provide direct services to our clients. Additionally, local expenditures increased during the 2008 grant year.
- 2. Section Number:** Form5\_Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
All areas of MCH Block dollars, (A) Maternal and Infant Care, (B) Preventative and Primary Care for Children, and (C) Children with Special Health Care Needs, are committed to continue a realignment of resources towards core infrastructure, population based, and enabling services. This increase in direct services, however, is partially due to increased overall funding availability and needs to provide direct services to our clients. Additionally, state appropriated funding increases during the 2007 grant year allowed for meeting the larger need than was anticipated and projected in the 2007 application.
- 3. Section Number:** Form5\_Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
All areas of MCH Block dollars, (A) Maternal and Infant Care, (B) Preventative and Primary Care for Children, and (C) Children with Special Health Care Needs, are committed to continue a realignment of resources towards core infrastructure, population based, and enabling services. The decrease for this year, however, is partially due to continued increased need for direct services to our clients and prioritization of available additional dollars. State appropriated funding during the 2008 grant year was not such that continuing efforts to increase this area could move forward.
- 4. Section Number:** Form5\_Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
All areas of MCH Block dollars, (A) Maternal and Infant Care, (B) Preventative and Primary Care for Children, and (C) Children with Special Health Care Needs, are committed to continue a realignment of resources towards core infrastructure, population based, and enabling services. The decrease for this year was due to an increased need in population-based and infrastructure services.
- 5. Section Number:** Form5\_Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
All areas of MCH Block dollars, (A) Maternal and Infant Care, (B) Preventative and Primary Care for Children, and (C) Children with Special Health Care Needs, are committed to continue a realignment of resources towards core infrastructure, population based, and enabling services. This increase is due to intensified efforts to shift resources to population based related areas.
- 6. Section Number:** Form5\_Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
All areas of MCH Block dollars, (A) Maternal and Infant Care, (B) Preventative and Primary Care for Children, and (C) Children with Special Health Care Needs, are committed to continue a realignment of resources towards core infrastructure, population based, and enabling services. This increase is partially due to increased overall funding and intensified efforts to shift resources to infrastructure related areas. Additionally, some local funding efforts during the 2008 grant year were prioritized to this area and allowed for larger expenditure than was projected in the 2008 application.
- 7. Section Number:** Form5\_Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
All areas of MCH Block dollars, (A) Maternal and Infant Care, (B) Preventative and Primary Care for Children, and (C) Children with Special Health Care Needs, are committed to continue a realignment of resources towards core infrastructure, population based, and enabling services. This increase is partially due to increased overall funding and intensified efforts to shift resources to infrastructure related areas. Additionally, some state appropriated funding increases during the 2007 grant year were prioritized to this area and allowed for larger expenditure than was projected in the 2007 application.

**FORM 6**

**NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED**

*Sect. 506(a)(2)(B)(iii)*

**STATE: OK**

**Total Births by Occurrence:** 53,733

**Reporting Year: 2008**

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment (3)	
	No.	%			No.	%
Phenylketonuria	53,733	100	12	4	1	25
Congenital Hypothyroidism	53,733	100	42	20	20	100
Galactosemia	53,733	100	7	0	0	
Sickle Cell Disease	53,733	100	13	10	10	100

**Other Screening (Specify)**

**Screening Programs for Older Children & Women (Specify Tests by name)**

Congenital Adrenal Hyperplasia	53,733		73	2	2	100
Cystic Fibrosis	53,733		114	10	10	100
Other Amino Acid Disorders	53,733		26	1	1	100
Sickle Cell Trait	53,733		468	0	0	
MCAD (medium chain acylCo-A dehydrogenase)	53,733		35	4	4	100
Other Fatty Acid disorders	53,733		11	4	1	25
Organic Acid disorders	53,733		3	0	0	
Hemoglobin C trait	53,733		141	0	0	
Other hemoglobin disease	53,733		13	3	3	100

(1) Use occurrent births as denominator.

(2) Report only those from resident births.

(3) Use number of confirmed cases as denominator.

## FORM NOTES FOR FORM 6

Source: Screening and Special Services, Oklahoma State Department of Health.

### FIELD LEVEL NOTES

1. **Section Number:** Form6\_Main  
**Field Name:** Phenylketonuria\_TreatmentNo  
**Row Name:** Phenylketonuria  
**Column Name:** Needing treatment that received treatment  
**Year:** 2010  
**Field Note:**  
3 PKU cases were hyperphe variants that require dietary treatment.
2. **Section Number:** Form6\_Screening Programs for Older Children and Women  
**Field Name:** OtherWomen  
**Row Name:** All Rows  
**Column Name:** All Columns  
**Year:** 2010  
**Field Note:**  
Two Fatty Acid disorders are variants that don't require treatment.

**FORM 7**  
**NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V**  
**(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)**

[Sec. 506(a)(2)(A)(i-ii)]

**STATE: OK**

**Reporting Year: 2008**

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	4,309	43.9	7.1	1.4	47.6	0.0
Infants < 1 year old	53,732	0.0	0.0	0.0	0.0	0.0
Children 1 to 22 years old	19,410	67.3	3.7	10.2	18.9	0.0
Children with Special Healthcare Needs	26,423	82.9	9.1	4.5	3.5	0.0
Others	75,623	24.7	0.5	14.7	60.1	0.0
<b>TOTAL</b>	<b>179,497</b>					

## FORM NOTES FOR FORM 7

None

### FIELD LEVEL NOTES

1. **Section Number:** Form7\_Main  
**Field Name:** PregWomen\_TS  
**Row Name:** Pregnant Women  
**Column Name:** Title V Total Served  
**Year:** 2010  
**Field Note:**  
Source: Oklahoma State Department of Health, Public Health Oklahoma Client Information System (PHOCIS).
2. **Section Number:** Form7\_Main  
**Field Name:** Children\_0\_1\_TS  
**Row Name:** Infants <1 year of age  
**Column Name:** Title V Total Served  
**Year:** 2010  
**Field Note:**  
Source: Number represents number of resident live births in Oklahoma during 2007.
3. **Section Number:** Form7\_Main  
**Field Name:** Children\_1\_22\_TS  
**Row Name:** Children 1 to 22 years of age  
**Column Name:** Title V Total Served  
**Year:** 2010  
**Field Note:**  
Source: Oklahoma State Department of Health, Public Health Oklahoma Client Information System (PHOCIS).
4. **Section Number:** Form7\_Main  
**Field Name:** CSHCN\_TS  
**Row Name:** Children with Special Health Care Needs  
**Column Name:** Title V Total Served  
**Year:** 2010  
**Field Note:**  
Source: CSHCN Program, Oklahoma Department of Human Services.
5. **Section Number:** Form7\_Main  
**Field Name:** AllOthers\_TS  
**Row Name:** Others  
**Column Name:** Title V Total Served  
**Year:** 2010  
**Field Note:**  
Others represents Family Planning clients. Source: Oklahoma State Department of Health, Public Health Oklahoma Client Information System (PHOCIS).



**FORM 8**  
**DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE**  
**XIX**  
**(BY RACE AND ETHNICITY)**  
[SEC. 506(A)(2)(C-D)]  
**STATE: OK**

Reporting Year: 2008

**I. UNDUPLICATED COUNT BY RACE**

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	53,701	40,784	4,985	6,407	1,217	18	0	290
Title V Served	4,309	3,828	176	184	47	20	54	0
Eligible for Title XIX	28,495	21,921	2,733	3,448	393	0	0	0
<b>INFANTS</b>								
Total Infants in State	107,956	82,760	9,772	12,580	2,405	33	0	406
Title V Served	54,908	41,822	4,965	6,462	1,246	16	0	397
Eligible for Title XIX	56,602	43,167	6,346	6,681	408	0	0	0

**II. UNDUPLICATED COUNT BY ETHNICITY**

<b>HISPANIC OR LATINO (Sub-categories by country or area of origin)</b>								
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	46,669	6,997	67	6,169	23	157	597	51
Title V Served	1,177	3,132	0	0	0	0	0	0
Eligible for Title XIX	24,307	4,688	0	0	0	0	0	0
<b>INFANTS</b>								
Total Infants in State	94,656	14,270	292	12,647	41	298	1,187	97
Title V Served	47,616	7,167	163	6,386	21	138	572	50
Eligible for Title XIX	48,447	8,893	0	0	0	0	0	0

## FORM NOTES FOR FORM 8

None

### FIELD LEVEL NOTES

1. **Section Number:** Form8\_I. Unduplicated Count By Race

**Field Name:** InfantsTotal\_All

**Row Name:** Total Infants in State

**Column Name:** Total All Races

**Year:** 2010

**Field Note:**

Note: This total represents an estimate of all infants < 2 years of age in Oklahoma on July 1, 2008: the sum of all infants born between July 1, 2006 and July 1, 2008 minus infant mortalities.

2. **Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** DeliveriesTitleV\_TotalHispanic

**Row Name:** Title V Served

**Column Name:** Total Hispanic or Latino

**Year:** 2010

**Field Note:**

Note: Data according to Hispanic sub-categories not available.

3. **Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** DeliveriesTitleXIX\_TotalHispanic

**Row Name:** Eligible for Title XIX

**Column Name:** Total Hispanic or Latino

**Year:** 2010

**Field Note:**

Note: Data according to Hispanic sub-categories not available.

4. **Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTotal\_TotalNotHispanic

**Row Name:** Total Infants in State

**Column Name:** Total Not Hispanic or Latino

**Year:** 2010

**Field Note:**

Note: This total represents an estimate of all Hispanic infants < 2 years of age in Oklahoma on July 1, 2008: the sum of all infants born between July 1, 2006 and July 1, 2008 minus infant mortalities.

5. **Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTotal\_TotalHispanic

**Row Name:** Total Infants in State

**Column Name:** Total Hispanic or Latino

**Year:** 2010

**Field Note:**

Note: This total represents an estimate of all Non-Hispanic infants < 2 years of age in Oklahoma on July 1, 2008: the sum of all infants born between July 1, 2006 and July 1, 2008 minus infant mortalities.

6. **Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleXIX\_TotalHispanic

**Row Name:** Eligible for Title XIX

**Column Name:** Total Hispanic or Latino

**Year:** 2010

**Field Note:**

Note: Data according to Hispanic sub-categories not available.

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: OK**

	<b>FY 2010</b>	<b>FY 2009</b>	<b>FY 2008</b>	<b>FY 2007</b>	<b>FY 2006</b>
1. State MCH Toll-Free "Hotline" Telephone Number	(800) 426-2747	(800) 426-2747	(800) 426-2747	(800) 426-2747	(800) 426-2747
2. State MCH Toll-Free "Hotline" Name	OASIS	OASIS	OASIS	OASIS	OASIS
3. Name of Contact Person for State MCH "Hotline"	Madeline McCollum	Madeline McCollum	Madeline McCollum	Madeline McCollum	Madeline McCollum
4. Contact Person's Telephone Number	(405) 271-6302	(405) 271-6302	(405) 271-6302	(405) 271-6302	(405) 271-6302
5. Contact Person's Email	Madalyn-Mccollom@ouh:				
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	114,784	145,152	178,830

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: OK**

	<b>FY 2010</b>	<b>FY 2009</b>	<b>FY 2008</b>	<b>FY 2007</b>	<b>FY 2006</b>
1. State MCH Toll-Free "Hotline" Telephone Number					
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"					
4. Contact Person's Telephone Number					
5. Contact Person's Email					
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

**FORM NOTES FOR FORM 9**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Form9\_Main

**Field Name:** calls\_2

**Row Name:** Number of calls received On the State MCH Hotline This reporting period

**Column Name:** FY

**Year:** 2008

**Field Note:**

During the FY2007 period, OASIS received 10,984 direct calls for assistance. The OASIS website was visited over 58,000 times, and the online searchable resource directory was used at least 45,800 times.

**FORM 10**  
**TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT**  
**STATE PROFILE FOR FY 2010**  
*[SEC. 506(A)(1)]*  
**STATE: OK**

1. State MCH Administration:  
(max 2500 characters)

The Title V Program is administered by two state agencies. The Oklahoma State Department of Health (OSDH) administers programs for pregnant women, mothers, infants, children and their families through the Maternal and Child Health Service (MCH). MCH organizationally consists of the Child and Adolescent Health Division, Perinatal and Reproductive Health Division and MCH Assessment. The Oklahoma Department of Human Services (OKDHS) administers the Children with Special Health Care Needs (CSHCN) Program through the Health Related and Medical Services of the Family Support Services Division.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 7,253,654
3. Unobligated balance (Line 2, Form 2)	\$ 0
4. State Funds (Line 3, Form 2)	\$ 5,500,846
5. Local MCH Funds (Line 4, Form 2)	\$ 0
6. Other Funds (Line 5, Form 2)	\$ 0
7. Program Income (Line 6, Form 2)	\$ 105,413
<b>8. Total Federal-State Partnership (Line 8, Form 2)</b>	<b>\$ 12,859,913</b>

9. Most significant providers receiving MCH funds:

County Health Depts; OU Dept. of OBGYN  
OU Dept. of Pediatrics; OK City-County Health Dept  
Tulsa City-County Health Dept; Variety Health Inc  
Oklahoma Institute for Child Advocacy

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	4,309
b. Infants < 1 year old	53,732
c. Children 1 to 22 years old	19,410
d. CSHCN	26,423
e. Others	75,623

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:  
(max 2500 characters)

MCH provides gap filling clinical services through county health departments and contract providers. Child and adolescent health clinical services include outreach, physical examination and treatment, anticipatory guidance, social work, nutrition and health education. Family planning and maternity services include outreach, risk assessment, physical examination and treatment, social work, nutrition and health education. Dental health services are also provided to include oral examinations, clinical procedures and treatment. Through contracted providers the CSHCN Program provides clinical and enabling services to neonates, children with sickle cell disease, children with autism and children who have been placed in custody of the state. The CSHCN Program provides formula, diapers and adaptive equipment through the Supplemental Security Income (SSI) Disabled Child Program (DCP) to children who receive SSI, as well as specialized formulas to children who have no other resource for receiving formula. The CSHCN Program also provides respite care for the parents/caretakers of medically fragile children. MCH and the CSHCN Program provide support to the statewide 1-800 toll free resource and referral system.

b. Population-Based Services:  
(max 2500 characters)

MCH provides education and training for health care providers, communities, schools, women, children and families on health topics such as nutrition and physical activity, prevention of Sudden Infant Death Syndrome (SIDS), safe sleeping, teen pregnancy prevention, school health, injury prevention, suicide prevention and violence prevention. MCH works with child care providers statewide on health and safety issues and provides leadership with the state early childhood systems initiative. In addition, community education and training on women and men's preventive health care, maternity care, women and men's reproductive health is provided. Support is provided for monitoring birth defects through a statewide registry and providing information and education on preventive measures. MCH supports and provides technical assistance for Fetal and Infant Mortality Review (FIMR), Maternal Mortality Review and Child Death Review activities. Oral health education to include the benefits of fluoridation is provided to communities, children and families. All newborns are screened for metabolic disease and hearing loss and followed to assure appropriate intervention is received. The CSHCN Program provides education to health care providers and communities on issues impacting children with special health care needs.

c. Infrastructure Building Services:  
(max 2500 characters)

MCH provides leadership in developing and setting state policy for services impacting the maternal and child health population to include children with special health care needs. The CSHCN Program provides leadership in developing and setting state policy for services impacting children with special health care needs and their families. MCH provides education, training and technical assistance to public and private health care providers statewide on current health policies and standards of practice. Collaborative relationships with other state agencies to include institutions of higher education enhance these efforts. Program specific data and population-based data from sources such as the State Systems Development Initiative (SSDI), Pregnancy Risk Assessment Monitoring System (PRAMS), The Oklahoma Toddler Survey (TOTS), Oklahoma First Grade Health Survey, Oklahoma Fifth Grade Health Survey, Youth Risk Behavior Survey (YRBS), and the Oklahoma Birth Defects Registry provides information for the planning, development, evaluation and maintenance of maternal and child health policy and procedures, program services and community planning. CSHCN services can be obtained through local OKDHS offices located in every county of the state. MCH and the CSHCN programs provide technical assistance, education, training and monitoring of Title V related activities to assure communities have resources to identify health care needs of women, infants, and children and to enhance/develop systems of care.

12. The primary Title V Program contact person:

13. The children with special health care needs (CSHCN) contact person:

Name Suzanna Dooley, MS, ARNP  
Title Chief, Maternal & Child Health Services  
Address OSDH, 1000 NE 10th Street  
City Oklahoma City  
State Oklahoma  
Zip 73117-1299  
Phone (405) 271-4480  
Fax (405) 271-2994  
Email suzannad@health.ok.gov  
Web www.health.ok.gov; OASIS - oasis.ouhsc.edu

Name Karen Hylton  
Title Director, CSHCN Program  
Address OKDHS, P.O. Box 25352  
City Oklahoma City  
State Oklahoma  
Zip 73125  
Phone (405) 521-3602  
Fax (405) 521-4158  
Email karen.hylton@okdhs.org  
Web www.okdhs.org

**FORM NOTES FOR FORM 10**

None

**FIELD LEVEL NOTES**

None

**FORM 11**  
**TRACKING PERFORMANCE MEASURES**  
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]  
**STATE: OK**

**Form Level Notes for Form 11**

None

**PERFORMANCE MEASURE # 01**

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

<b>Annual Objective and Performance Data</b>					
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Performance Objective</b>	100	100	100	100	100
<b>Annual Indicator</b>	100.0	100.0	100.0	100.0	100.0
<b>Numerator</b>	31	54	50	67	58
<b>Denominator</b>	31	54	50	67	58
<b>Data Source</b>					Screening and Special Services, OSDH
<p>Check this box if you cannot report the numerator because</p> <p>1. There are fewer than 5 events over the last year, and</p> <p>2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.</p> <p><small>(Explain data in a year note. See Guidance, Appendix IX.)</small></p>					
<b>Is the Data Provisional or Final?</b>				Final	Final

<b>Annual Objective and Performance Data</b>					
	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
<b>Annual Performance Objective</b>	100	100	100	100	100
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

**1. Section Number:** Form11\_Performance Measure #1

**Field Name:** PM01

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: Data were provided by Screening and Special Services, Oklahoma State Department of Health.

**2. Section Number:** Form11\_Performance Measure #1

**Field Name:** PM01

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Data were provided by Screening and Special Services, Oklahoma State Department of Health.

**3. Section Number:** Form11\_Performance Measure #1

**Field Name:** PM01

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: Data were provided by Screening and Special Services, Oklahoma State Department of Health.



**PERFORMANCE MEASURE # 02**

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

<b>Annual Objective and Performance Data</b>					
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Performance Objective</b>	53.8	54.9	56	57.4	58.8
<b>Annual Indicator</b>	50.4	50.4	50.4	56.9	56.9
<b>Numerator</b>					
<b>Denominator</b>					
<b>Data Source</b>					National Survey of CSHCN
<b>Check this box if you cannot report the numerator because</b> <b>1. There are fewer than 5 events over the last year, and</b> <b>2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.</b> <i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
<b>Is the Data Provisional or Final?</b>				Final	Provisional

<b>Annual Objective and Performance Data</b>					
	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
<b>Annual Performance Objective</b>	60	60.9	61.5	62.7	63.9
<b>Annual Indicator</b>					
<b>Numerator</b>	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
<b>Denominator</b>					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006.

2. **Section Number:** Form11\_Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

Objectives for 2008-2012 have been revised to reflect more plausible targets given data from CSHCN survey.

3. **Section Number:** Form11\_Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

**PERFORMANCE MEASURE # 03**

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

**Annual Objective and Performance Data**

	2004	2005	2006	2007	2008
<b>Annual Performance Objective</b>	56.7	57.8	59.3	60.5	60.5
<b>Annual Indicator</b>	53.3	53.3	53.3	49.7	49.7
<b>Numerator</b>					
<b>Denominator</b>					
<b>Data Source</b>					National Survey of CSHCN
<b>Check this box if you cannot report the numerator because</b> 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
<b>Is the Data Provisional or Final?</b>				Final	Provisional

**Annual Objective and Performance Data**

	2009	2010	2011	2012	2013
<b>Annual Performance Objective</b>	50.2	50.7	51.2	51.7	52.2
<b>Annual Indicator</b>					
<b>Numerator</b>	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
<b>Denominator</b>					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006.

**2. Section Number:** Form11\_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

Objectives for 2008-2012 have been revised to reflect more plausible targets given data from CSHCN survey.

**3. Section Number:** Form11\_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2006**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

**PERFORMANCE MEASURE # 04**

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	59.5	61	62.5	64.1	62.9
Annual Indicator	56.4	56.4	56.4	61.6	61.6
Numerator					
Denominator					
Data Source					National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	64.2	65.5	66.8	68.1	69.4
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006.

2. **Section Number:** Form11\_Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

Objectives for 2008-2012 have been revised to reflect more plausible targets given data from CSHCN survey.

3. **Section Number:** Form11\_Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

**PERFORMANCE MEASURE # 05**

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	69.7	71.4	73.2	75.1	91
Annual Indicator	67.6	67.6	67.6	90.3	90.3
Numerator					
Denominator					
Data Source					National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	92	93	94	95	96
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006.

2. **Section Number:** Form11\_Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

Objectives for 2008-2012 have been revised to reflect more plausible targets given data from CSHCN survey.

3. **Section Number:** Form11\_Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

**PERFORMANCE MEASURE # 06**

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	8.2	8.2	6	6.2	45
Annual Indicator	5.8	5.8	5.8	43.7	43.7
Numerator					
Denominator					
Data Source					National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	46	47	48	49	50
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006.

2. **Section Number:** Form11\_Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

Objectives for 2008-2012 have been revised to reflect more plausible targets given data from CSHCN survey.

3. **Section Number:** Form11\_Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

Objectives for 2007-2011 have been revised to reflect more plausible targets given data from CSHCN survey.

**PERFORMANCE MEASURE # 07**

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

<b>Annual Objective and Performance Data</b>					
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Performance Objective</b>	<u>82</u>	<u>83.6</u>	<u>74.2</u>	<u>76.4</u>	<u>80.8</u>
<b>Annual Indicator</b>	<u>72.0</u>	<u>75.7</u>	<u>80.4</u>	<u>80.1</u>	<u>80.1</u>
<b>Numerator</b>	<u>34,215</u>	<u>37,087</u>	<u>40,268</u>	<u>41,564</u>	<u>41,564</u>
<b>Denominator</b>	<u>47,521</u>	<u>48,992</u>	<u>50,085</u>	<u>51,890</u>	<u>51,890</u>

**Data Source**

National  
Immunization  
Survey & U.S.  
Census Bureau

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

<b>Annual Objective and Performance Data</b>					
	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
<b>Annual Performance Objective</b>	<u>82.1</u>	<u>83.4</u>	<u>84.7</u>	<u>86</u>	<u>87.3</u>
<b>Annual Indicator</b>					
<b>Numerator</b>	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
<b>Denominator</b>					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #7

**Field Name:** PM07

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source of data: CY2008 data not yet available, hence CY2007 data is used as a placeholder. Numerator is estimate from National Immunization Survey, Q1/2007-Q4/2007, of percent of Oklahoma children aged 19-35 months who have received 4:3:1:3:3 vaccination series .

Population data in denominator were obtained from the U.S. Bureau of the Census.

Denominator is 2008 population estimate of 2 year olds obtained from the U.S. Bureau of the Census.

**2. Section Number:** Form11\_Performance Measure #7

**Field Name:** PM07

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source of data: Numerator is estimate from National Immunization Survey, Q1/2007-Q4/2007, of percent of Oklahoma children aged 19-35 months who have received 4:3:1:3:3 vaccination series .

Population data in denominator were obtained from the U.S. Bureau of the Census.

Annual Performance Objectives for 2008-2012 have been revised to reflect expected increase in % of 19-35 month olds receiving vaccinations. OSDH will be launching Operation Buzzer-Beater to ensure vaccinations of 24 month-olds who have not received sufficient immunization shots.

**3. Section Number:** Form11\_Performance Measure #7

**Field Name:** PM07

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source of data: Numerator is estimate from National Immunization Survey, Q1/2006-Q4/2006, of percent of Oklahoma children aged 19-35 months who have received 4:3:1:3:3 vaccination series .

Population data in denominator were obtained from the U.S. Bureau of the Census.

Objectives for 2007-2011 have been revised to reflect more plausible targets given data from NIS survey.

**PERFORMANCE MEASURE # 08**

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	28	27.3	31.4	27.1	26.8
Annual Indicator	31.9	27.4	30.4	30.4	30.5
Numerator	2,145	2,020	2,281	2,293	2,268
Denominator	67,198	73,677	75,011	75,486	74,346
Data Source					OSDH vital statistics & U.S. Census Bureau.
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?	Final				Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>30</u>	<u>29.5</u>	<u>29</u>	<u>28.5</u>	<u>28</u>
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #8  
**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Source: Numerator: Health Care Information, Denominator: U.S. Census Bureau.
- Section Number:** Form11\_Performance Measure #8  
**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: Numerator: Health Care Information, Denominator: U.S. Census Bureau.
- Section Number:** Form11\_Performance Measure #8  
**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: Health Care Information, OSDH.

Objectives for 2007-2011 have been revised to reflect more plausible targets given recent data from Oklahoma vital statistics.

**PERFORMANCE MEASURE # 09**

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

**Annual Objective and Performance Data**

	2004	2005	2006	2007	2008
Annual Performance Objective	40	41.2	37.7	38.7	39.6
Annual Indicator	32.9	36.8	34.4	35.1	39.7
Numerator					
Denominator					
Data Source					Oklahoma Oral Health Needs Assessment
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

**Annual Objective and Performance Data**

	2009	2010	2011	2012	2013
Annual Performance Objective	40.2	40.7	41.3	41.8	42.3
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #9  
**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Source: Statewide Oklahoma Oral Health Needs Assessment, Dental Health Service, OSDH.
- Section Number:** Form11\_Performance Measure #9  
**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: Statewide Oklahoma Oral Health Needs Assessment, Dental Health Service, OSDH.
- Section Number:** Form11\_Performance Measure #9  
**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: Statewide Oklahoma Oral Health Needs Assessment, 2006 - Dental Health Service, OSDH.

Objectives for 2007-2011 have been revised to reflect more attainable targets given data from the dental needs assessment.



**PERFORMANCE MEASURE # 10**

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	4.5	3.7	5.5	5	5
Annual Indicator	5.8	4.9	6.7	5.9	5.9
Numerator	41	36	49	44	44
Denominator	712,680	727,415	735,666	745,170	745,170
Data Source					Vital records & U.S. Census Bureau
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	5.7	5.5	5.3	5.1	4.9
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #10  
**Field Name:** PM10  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Source for death data: Health Care Information, OSDH for numerator, U.S. Census Bureau for denominator. Provisional 2007 data is used until 2008 deaths are finalized
- Section Number:** Form11\_Performance Measure #10  
**Field Name:** PM10  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source for death data: Health Care Information, OSDH for numerator, U.S. Census Bureau for denominator. Provisional 2007 data used for numerator.  
  
 Despite the increase in the death rate of children <15 years of age to motor vehicle crashes in 2006, future rates are expected to remain closer to 5 deaths per 100,000.
- Section Number:** Form11\_Performance Measure #10  
**Field Name:** PM10  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source for death data: Health Care Information, OSDH for numerator, U.S. Census Bureau for denominator.

**PERFORMANCE MEASURE # 11**

The percent of mothers who breastfeed their infants at 6 months of age.

**Annual Objective and Performance Data**

	2004	2005	2006	2007	2008
Annual Performance Objective			31.8	32.4	33.1
Annual Indicator		31.2	29.6	30.2	30.2
Numerator				14,416	14,416
Denominator				47,662	47,662

Data Source

Oklahoma TOTS survey

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2009	2010	2011	2012	2013
Annual Performance Objective	30.7	31.2	31.7	32.2	32.7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: 2008 data unavailable, therefore 2007 TOTS survey data is used. Numerator and denominator are weighted population estimates. Oklahoma 2007 TOTS surveyed mothers who completed 2005 PRAMS survey.

2. **Section Number:** Form11\_Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Oklahoma 2007 TOTS survey of mothers who completed 2005 PRAMS survey. Numerator and denominator are weighted population estimates.

3. **Section Number:** Form11\_Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Data for NPM#11 were obtained from the National Immunization Survey, 2004.

**PERFORMANCE MEASURE # 12**

Percentage of newborns who have been screened for hearing before hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	93.5	96.6	97.2	95.1	95.5
Annual Indicator	93.8	94.6	95.1	95.1	96.8
Numerator	47,989	49,001	51,352	52,262	52,012
Denominator	51,157	51,775	54,010	54,946	53,731
Data Source					Screening and Special Services, OSDH
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional
<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	97	97.2	97.4	97.6	97.8
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: Data were obtained from Screening and Special Services, OSDH. Year 2008 data are provisional estimates.

By 2011 auditory screening machines will electronically transmit results from hospital newborn screenings to OSDH database, which will reduce clerical errors and thus increase the reported % of newborns receiving hearing screenings .

2. **Section Number:** Form11\_Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Data were obtained from Screening and Special Services, OSDH. Year 2007 data are not yet available. Therefore, year 2006 is repeated to provide an estimate.

3. **Section Number:** Form11\_Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Data were obtained from Screening and Special Services, OSDH.

**PERFORMANCE MEASURE # 13**

Percent of children without health insurance.

**Annual Objective and Performance Data**

	2004	2005	2006	2007	2008
Annual Performance Objective	14	13.7	17.8	13.9	12.4
Annual Indicator	15.3	14.0	12.5	12.5	12.6
Numerator	141,860	127,190	114,000	114,000	116,000
Denominator	924,670	910,660	913,000	913,000	920,000

Data Source

U.S. Census  
Bureau

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Annual Objective and Performance Data**

	2009	2010	2011	2012	2013
Annual Performance Objective	12.5	12.4	12.3	12.2	12.1
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

- 1.
- Section Number:**
- Form11\_Performance Measure #13

**Field Name:** PM13**Row Name:****Column Name:****Year:** 2008**Field Note:**

Sources: U.S. Census Bureau, Current Population Survey.

- 2.
- Section Number:**
- Form11\_Performance Measure #13

**Field Name:** PM13**Row Name:****Column Name:****Year:** 2007**Field Note:**

Sources: U.S. Census Bureau, Current Population Survey. Current 2007 data not yet available, therefore 2006 numbers used as an estimate.

The 2008-2012 future annual performance objectives have been revised to a conservative estimate of the % uninsured children given current economic conditions in Oklahoma.

- 3.
- Section Number:**
- Form11\_Performance Measure #13

**Field Name:** PM13**Row Name:****Column Name:****Year:** 2006**Field Note:**

Sources: U.S. Census Bureau, Current Population Survey.

**PERFORMANCE MEASURE # 14**

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

	Annual Objective and Performance Data				
	2004	2005	2006	2007	2008
Annual Performance Objective			50.2	53.9	53.3
Annual Indicator		51.3	54.4	54.4	54.4
Numerator					
Denominator					
Data Source					NCHS SLAITS Survey
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>52.3</u>	<u>51.2</u>	<u>50.2</u>	<u>50</u>	<u>50</u>
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: Data were obtained from the NCHS SLAITS dataset for the National Survey of Children's Health. This national survey provides state-specific estimates for the proportion of children aged 2-5 receiving WIC benefits. Numerator and denominator data are unavailable. 2008 data not available, hence 2006 numbers used as an estimate.

Note: 2007 SLAITS survey does not ask for WIC participation information - this question was discontinued after the 2003 SLAITS survey.

2. **Section Number:** Form11\_Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Data were obtained from the NCHS SLAITS dataset for the National Survey of Children's Health. This national survey provides state-specific estimates for the proportion of children aged 2-5 receiving WIC benefits. Numerator and denominator data are unavailable. 2007 data not available, hence 2006 numbers used as an estimate.

3. **Section Number:** Form11\_Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: Data were obtained from the NCHS SLAITS dataset for the National Survey of Children's Health. This national survey provides state-specific estimates for the proportion of children aged 2-5 receiving WIC benefits. Numerator and denominator data are unavailable.

**PERFORMANCE MEASURE # 15**

Percentage of women who smoke in the last three months of pregnancy.

**Annual Objective and Performance Data**

	2004	2005	2006	2007	2008
Annual Performance Objective			18.8	18.6	18.4
Annual Indicator		19.6	19.3	21.3	21.3
Numerator		10,027	9,953	11,101	11,101
Denominator		51,157	51,500	52,148	52,148
Data Source					PRAMS

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2009	2010	2011	2012	2013
Annual Performance Objective	21	20.5	20	19.5	19
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #15

**Field Name:** PM15**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Data for this performance measure are drawn from the Oklahoma Pregnancy Risk Assessment Monitoring System (PRAMS). Data for year 2008 have not been released to date. Therefore, PRAMS survey data for 2007 have been used to provide an estimate for this measure. Numerator and denominator consist of weighted counts.

2. **Section Number:** Form11\_Performance Measure #15

**Field Name:** PM15**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Data for this performance measure are drawn from the Oklahoma Pregnancy Risk Assessment Monitoring System (PRAMS). Data for year 2007. Numerator and denominator consist of weighted counts.

3. **Section Number:** Form11\_Performance Measure #15

**Field Name:** PM15**Row Name:****Column Name:****Year:** 2006**Field Note:**

Data for this performance measure are drawn from the Oklahoma Pregnancy Risk Assessment Monitoring System (PRAMS) for the year 2006.

**PERFORMANCE MEASURE # 16**

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	9	8.9	10.1	7.9	9.9
Annual Indicator	12.2	8.0	10.4	7.9	11.5
Numerator	27	19	26	20	29
Denominator	221,613	236,697	250,816	251,911	251,880
Data Source					Vital Records & U.S. Census Bureau
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>11</u>	<u>10.5</u>	<u>10</u>	<u>9.5</u>	<u>9</u>
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #16

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Sources: Numerator obtained from Health Care Information, Oklahoma State Department of Health, denominator from U.S. Census Bureau.

2. **Section Number:** Form11\_Performance Measure #16

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Sources: Numerator obtained from Health Care Information, Oklahoma State Department of Health, denominator from U.S. Census Bureau.

The 2008-2012 annual performance objectives have been revised to reflect current data.

3. **Section Number:** Form11\_Performance Measure #16

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Sources: Numerator obtained from Health Care Information, Oklahoma State Department of Health, denominator from U.S. Census Bureau.

Objectives for 2007-2011 have been revised to reflect more attainable targets given data from Oklahoma vital statistics.

**PERFORMANCE MEASURE # 17**

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	79.1	80.3	75.5	77	83
Annual Indicator	74.0	73.4	82.1	78.6	78.6
Numerator	481	545	724	640	640
Denominator	650	743	882	814	814
Data Source					OSDH Vital Records
Do not report the numerator because there were fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	83.5	84	84.5	85	85.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Oklahoma State Department of Health, Center for Health Statistics, Vital Records Division. Finalized 2008 data are not yet available, therefore 2007 data are used as a placeholder.

**2. Section Number:** Form11\_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Oklahoma State Department of Health, Center for Health Statistics, Vital Records Division.

Objectives for 2008-2012 have been revised to reflect more plausible targets given data from Oklahoma vital statistics.

**3. Section Number:** Form11\_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: Oklahoma State Department of Health, Center for Health Statistics, Vital Records Division.

The increase from 73.4% in 2005 to 82.1% in 2006 reflects an increased number of Level III hospitals with NICU facilities in Oklahoma. In addition, an increase in telemedicine consultations and Medicaid referrals is expected to maintain annual indicators above 80%.

Therefore, Objectives for 2008-2012 have been revised to reflect more plausible targets given data from Oklahoma vital statistics.



**PERFORMANCE MEASURE # 18**

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

**Annual Objective and Performance Data**

	2004	2005	2006	2007	2008
<b>Annual Performance Objective</b>	83.5	84.8	79.3	80.5	81.7
<b>Annual Indicator</b>	78.1	75.5	74.0	74.5	74.5
<b>Numerator</b>	38,758	39,085	39,943	40,915	40,915
<b>Denominator</b>	49,623	51,775	54,010	54,946	54,946

**Data Source**OSDH Vital  
Records

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

**Is the Data Provisional or Final?**

Provisional

Provisional

**Annual Objective and Performance Data**

	2009	2010	2011	2012	2013
<b>Annual Performance Objective</b>	74.7	74.9	75.1	75.3	75.5
<b>Annual Indicator</b>					
<b>Numerator</b>	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
<b>Denominator</b>					

**Field Level Notes**

- 1.
- Section Number:**
- Form11\_Performance Measure #18

**Field Name:** PM18**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Health Care Information, OSDH. Data for year 2008 are not yet available. Year 2007 is repeated as an estimate.

- 2.
- Section Number:**
- Form11\_Performance Measure #18

**Field Name:** PM18**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Health Care Information, OSDH.

Higher future annual performance objectives reflects the expectations of the Soon-To-Be-Sooners Medicaid program which will expand prenatal care available to pregnant women who are non-citizens.

- 3.
- Section Number:**
- Form11\_Performance Measure #18

**Field Name:** PM18**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: Health Care Information, OSDH.

**STATE PERFORMANCE MEASURE # 1**

The percent of women who have an unintended pregnancy (mistimed or unwanted) resulting in live birth.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
<b>Annual Performance Objective</b>	41.5	40.9	50.8	49.8	48
<b>Annual Indicator</b>	51.9	48.8	48.4	48.0	48.0
<b>Numerator</b>	26,550	25,266	24,950	25,073	25,073
<b>Denominator</b>	51,157	51,775	51,545	52,250	52,250
<b>Data Source</b>					PRAMS
<b>Is the Data Provisional or Final?</b>				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
<b>Annual Performance Objective</b>	47.8	47.6	47.4	47.2	47
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #1**Field Name:** SM1**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Oklahoma Pregnancy Risk Assessment Monitoring System (PRAMS), 2007. Data for year 2008 are not available at this time. Year 2007 data repeated as an estimate for 2008

**2. Section Number:** Form11\_State Performance Measure #1**Field Name:** SM1**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Oklahoma Pregnancy Risk Assessment Monitoring System (PRAMS), 2007.

Despite having exceeded the Annual Performance Objective for 2006, the objectives for 2008-2012 have not been revised for lack of evidence of a significant decrease in the percent of pregnancies which are unintended.

**3. Section Number:** Form11\_State Performance Measure #1**Field Name:** SM1**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: Oklahoma Pregnancy Risk Assessment Monitoring System (PRAMS), 2006.

Objectives for 2007-2011 have been revised to reflect more plausible targets given data from PRAMS. Objectives are targeted to a step-wise decline in the unintended pregnancy rate.

**STATE PERFORMANCE MEASURE # 3**

The percent of adolescents grades 9-12 smoking tobacco products

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	24.8	24.4	28.2	27.7	23
Annual Indicator	26.5	28.6	28.6	23.2	23.2
Numerator	69,200	42,781	42,970	35,197	41,369
Denominator	261,131	149,585	150,246	151,710	178,316
Data Source					YRBS
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	22.7	22.4	22.1	21.8	21.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Form11\_State Performance Measure #3

**Field Name:** SM3**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Numerator derived from 2007 Oklahoma Youth Risk Behavior Survey (YRBS), MCH, OSDH. Denominator is high school enrollment during 2007-2008 season.

2. **Section Number:** Form11\_State Performance Measure #3

**Field Name:** SM3**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Numerator derived from 2007 Oklahoma Youth Risk Behavior Survey (YRBS), MCH, OSDH. Denominator is average daily high school attendance during 2006-2007 season.

3. **Section Number:** Form11\_State Performance Measure #3

**Field Name:** SM3**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: Numerator derived from 2005 Oklahoma Youth Risk Behavior Survey (YRBS), MCH, OSDH. Denominator is average daily high school attendance during 2005-2006 season.

Objectives for 2007-2011 have been revised to reflect more plausible targets given data from the Oklahoma YRBS. Objectives are targeted toward a step-wise decline in adolescent smoking rates.

**STATE PERFORMANCE MEASURE # 4**

The number of families with a child with special health care needs receiving respite care provided through the CSHCN program.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	130	134	144	160	168
Annual Indicator	120	142	152	138	62
Numerator					
Denominator					
Data Source					CSHCN Program, OK Dept of Human Services
Is the Data Provisional or Final?				Final	Final

  

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	60	60	60	60	60
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Children with Special Health Care Needs (CSHCN) Program, Oklahoma Department of Human Services.

Number of respite vouchers provided by CSHCN has decreased because of the availability of funding from other sources. This is an unduplicated count, however CSHCN provides 2 vouchers per year to most families.

**2. Section Number:** Form11\_State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Children with Special Health Care Needs (CSHCN) Program, Oklahoma Department of Human Services.

**3. Section Number:** Form11\_State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: Children with Special Health Care Needs (CSHCN) Program, Oklahoma Department of Human Services.

**STATE PERFORMANCE MEASURE # 6**

The extent to which the MCH program area develops and maintains the capacity to access and link health-related data relevant to targeted MCH populations.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective			21	21	18
Annual Indicator		14	14	15	15
Numerator					
Denominator					
Data Source					MCH Assessment, OSDH
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>18</u>	<u>18</u>	<u>18</u>	<u>18</u>	<u>18</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

- Section Number:** Form11\_State Performance Measure #6  
**Field Name:** SM6  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Source: MCH Assessment, OSDH. Score derived from Form 19 HSCI #09A.
- Section Number:** Form11\_State Performance Measure #6  
**Field Name:** SM6  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: MCH Assessment, OSDH. Score derived from Form 19 HSCI #09A. Future annual performance objectives have been adjusted to more realistically reflect MCH data capacity.
- Section Number:** Form11\_State Performance Measure #6  
**Field Name:** SM6  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: MCH Assessment, OSDH. Score derived from Form 19 HSCI #09A.

**STATE PERFORMANCE MEASURE # 7**

The percent of Medicaid eligible children with special health care needs who report receiving routine dental care.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective			20	39.4	42
Annual Indicator			38.3	41.5	43.8
Numerator			10,908	10,758	10,110
Denominator			28,496	25,921	23,073
Data Source					CSHCN program
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	42.5	43	43.5	44	44.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

- Section Number:** Form11\_State Performance Measure #7  
**Field Name:** SM7  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Source: CSHCN program, OKDHS.
- Section Number:** Form11\_State Performance Measure #7  
**Field Name:** SM7  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: CSHCN program, OKDHS. Medicaid claims data, OHCA.
- Section Number:** Form11\_State Performance Measure #7  
**Field Name:** SM7  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: CSHCN program, OKDHS. Medicaid claims data, OHCA.

Objectives for 2007-2011 have been revised to reflect more plausible targets given recent data from CSHCN Program. Targets reflect step-wise upward trend in the percent of CSHCN receiving dental care.

**STATE PERFORMANCE MEASURE # 8**

The percent of adolescents grades 9-12 not using alcohol during the past 30 days.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective			60.7	61.9	63.1
Annual Indicator		59.5	59.5	56.9	56.9
Numerator		89,003	89,396	86,323	101,462
Denominator		149,585	150,246	151,710	178,316
Data Source					YRBS & OK State Dept of Education
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	64.4	65.7	66.4	67.1	67.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

- Section Number:** Form11\_State Performance Measure #8  
**Field Name:** SM8  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Source: Numerator derived from 2007 Oklahoma Youth Risk Behavior Survey (YRBS), MCH, OSDH. Denominator is high school enrollment during 2007-2008 season.
- Section Number:** Form11\_State Performance Measure #8  
**Field Name:** SM8  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: Numerator derived from 2007 Oklahoma Youth Risk Behavior Survey (YRBS), MCH, OSDH. Denominator is average daily high school attendance during 2006-2007 season.
- Section Number:** Form11\_State Performance Measure #8  
**Field Name:** SM8  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: Numerator derived from 2005 Oklahoma Youth Risk Behavior Survey (YRBS), MCH, OSDH. Denominator is average daily high school attendance during 2005-2006 season.

**STATE PERFORMANCE MEASURE # 10**

The percent of adolescents overweight and obese (greater than or equal to 85th percentile of gender-specific body mass index [BMI] distribution)

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective					29.6
Annual Indicator		31.1	31.1	29.9	29.9
Numerator		46,521	46,727	45,361	53,316
Denominator		149,585	150,246	151,710	178,316
Data Source					YRBS & OK State Department of Education
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective	29.3	29	28.7	28.4	28.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

- 1.
- Section Number:**
- Form11\_State Performance Measure #10

**Field Name:** SM10**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Numerator derived from 2007 Oklahoma Youth Risk Behavior Survey (YRBS), MCH, OSDH. Denominator is high school enrollment during 2007-2008 season.

- 2.
- Section Number:**
- Form11\_State Performance Measure #10

**Field Name:** SM10**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Numerator derived from 2007 Oklahoma Youth Risk Behavior Survey (YRBS), MCH, OSDH. Denominator is average daily high school attendance during 2006-2007 season.

- 3.
- Section Number:**
- Form11\_State Performance Measure #10

**Field Name:** SM10**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: Numerator derived from 2005 Oklahoma Youth Risk Behavior Survey (YRBS), MCH, OSDH. Denominator is average daily high school attendance during 2005-2006 season.



**STATE PERFORMANCE MEASURE # 11**

The percentage of full-term infants who are put to sleep on their backs.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective					
Annual Indicator			59.7	60.3	60.3
Numerator			27,192	28,147	28,147
Denominator			45,575	46,659	46,659
Data Source					Pregnancy Risk Assessment Monitoring System
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	61	62	63	64	65
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #11

**Field Name:** SM11

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: 2008 PRAMS data not yet available, therefore 2007 used as a proxy.

**2. Section Number:** Form11\_State Performance Measure #11

**Field Name:** SM11

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: 2007 Pregnancy Risk Assessment Monitoring System.

**3. Section Number:** Form11\_State Performance Measure #11

**Field Name:** SM11

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: 2006 Pregnancy Risk Assessment Monitoring System.

**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
[SECS 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)]  
**STATE: OK**

**Form Level Notes for Form 12**

None

**OUTCOME MEASURE # 01**

The infant mortality rate per 1,000 live births.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	7.2	7.1	7.8	7.7	7.3
Annual Indicator	7.9	8.1	8.0	8.4	7.3
Numerator	406	418	434	460	390
Denominator	51,157	51,775	54,010	54,946	53,733
Data Source					OSDH Vital Records
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	7.1	6.9	6.7	6.5	6.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

- Section Number:** Form12\_Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Source: Health Care Information, OSDH. Provisional birth and death numbers for year 2008 are used since vital records have not been finalized.

- Section Number:** Form12\_Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: Health Care Information, OSDH. Provisional death numbers for year 2007 are used since death records have not been finalized.

The 2008-2012 Annual Performance Objectives have been revised to reflect expected results from a new initiative to reduce infant mortality rates in Oklahoma.

- Section Number:** Form12\_Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: Health Care Information, OSDH.

Objectives for 2007-2011 have been revised to reflect more plausible targets given recent data from Oklahoma vital statistics.

**OUTCOME MEASURE # 02**

The ratio of the black infant mortality rate to the white infant mortality rate.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	2	1.9	1.9	1.8	1.7
Annual Indicator	2.4	2.1	2.4	2.5	2.3
Numerator	16.6	15.2	15.8	18.3	15.1
Denominator	7	7.2	6.7	7.2	6.6

Data Source

OSDH Vital  
Records

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	1.6	1.5	1.4	1.3	1.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Form12\_Outcome Measure 2

**Field Name:** OM02

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: Health Care Information, OSDH.

2. **Section Number:** Form12\_Outcome Measure 2

**Field Name:** OM02

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Health Care Information, OSDH.

The 2008-2012 Annual Performance Objectives have been revised to reflect expected results from a new initiative to reduce infant mortality rates in Oklahoma.

3. **Section Number:** Form12\_Outcome Measure 2

**Field Name:** OM02

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: Health Care Information, OSDH.

**OUTCOME MEASURE # 03**

The neonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	4.3	4.2	4.7	4.7	4.4
Annual Indicator	4.7	4.8	4.4	4.7	4.6
Numerator	240	248	240	260	247
Denominator	51,157	51,775	54,010	54,946	53,733
Data Source					OSDH Vital Records
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	4.3	4.1	4	3.9	3.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Form12\_Outcome Measure 3

**Field Name:** OM03

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: Health Care Information, OSDH.

2. **Section Number:** Form12\_Outcome Measure 3

**Field Name:** OM03

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Health Care Information, OSDH.

The 2008-2012 Annual Performance Objectives have been revised to reflect expected results from a new initiative to reduce infant mortality rates in Oklahoma.

3. **Section Number:** Form12\_Outcome Measure 3

**Field Name:** OM03

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: Health Care Information, OSDH.

**OUTCOME MEASURE # 04**

The postneonatal mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	2.9	2.9	3.2	3.2	2.9
Annual Indicator	3.2	3.3	4.0	3.3	2.7
Numerator	166	170	217	179	144
Denominator	51,157	51,775	54,010	54,946	53,733
Data Source					OSDH Vital Records
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	2.8	2.8	2.7	2.6	2.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Form12\_Outcome Measure 4  
**Field Name:** OM04  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Source: Health Care Information, OSDH.

2. **Section Number:** Form12\_Outcome Measure 4  
**Field Name:** OM04  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: Health Care Information, OSDH.

The 2008-2012 Annual Performance Objectives have been revised to reflect expected results from a new initiative to reduce infant mortality rates in Oklahoma.

3. **Section Number:** Form12\_Outcome Measure 4  
**Field Name:** OM04  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: Health Care Information, OSDH.

**OUTCOME MEASURE # 05**

The perinatal mortality rate per 1,000 live births plus fetal deaths.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	8.7	8.6	9.5	9.4	9.1
Annual Indicator	9.6	10.1	9.0	9.1	9.1
Numerator	494	526	491	501	501
Denominator	51,478	52,110	54,324	55,266	55,266
Data Source					OSDH Vital Records
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	8.9	8.7	8.5	8.3	8.1
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes****1. Section Number:** Form12\_Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Health Care Information, OSDH. 2008 data not yet available, therefore 2007 numbers used as placeholders.

**2. Section Number:** Form12\_Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Health Care Information, OSDH.

**3. Section Number:** Form12\_Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: Health Care Information, OSDH.

Objectives for 2007-2011 have been revised to reflect more plausible targets given recent data from Oklahoma vital statistics.

**OUTCOME MEASURE # 06**

The child death rate per 100,000 children aged 1 through 14.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	25.6	25.3	25.1	24.8	24.6
Annual Indicator	25.5	26.4	31.0	29.1	28.8
Numerator	175	181	212	201	201
Denominator	685,374	685,374	684,013	689,788	698,280
Data Source					OSDH Vital Records & U.S. Census Bureau
Do not report the numerator because fewer than 5 events over the last year, and fewer than 5 events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>28.3</u>	<u>27.8</u>	<u>27.3</u>	<u>26.8</u>	<u>26.3</u>
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

**Field Level Notes**

1. **Section Number:** Form12\_Outcome Measure 6

**Field Name:** OM06

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Health Care Information, OSDH. Year 2007 data are not available at this time, therefore year 2006 repeated as an estimate.

2. **Section Number:** Form12\_Outcome Measure 6

**Field Name:** OM06

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: Health Care Information, OSDH.

**FORM 13**  
**CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS**  
**STATE: OK**

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

3

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

2

4. Family members are involved in service training of CSHCN staff and providers.

3

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

1

**Total Score:** 15

**Rating Key**

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met



**FORM NOTES FOR FORM 13**

Source: CSHCN program.

**FIELD LEVEL NOTES**

None

**FORM 14**  
**LIST OF MCH PRIORITY NEEDS**

[Sec. 505(a)(5)]

**STATE: OK FY: 2010**

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Reduce the prevalence of obesity among the MCH populations
2. Reduce substance abuse behaviors in the MCH populations
3. Improve utilization of dental health services by pregnant women and children
4. Increase access to prenatal care
5. Increase the proportion of the MCH populations who are insured
6. Improve transition services for adolescents
7. Reduce unwanted, unplanned pregnancies
8. Increase the proportion of fully immunized children entering school
9. Increase the proportion of mothers who breastfeed their infants
10. Improve data access and file linkages of public health databases

**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

**FORM 15**  
**TECHNICAL ASSISTANCE(TA) REQUEST**

STATE: OK

APPLICATION YEAR: 2010

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	<b>Other</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      N/A      </u>	Not requested at this time - see note	Not requested at this time - see note	Not requested at this time - see note
2.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			

	measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

**FORM NOTES FOR FORM 15**

Oklahoma is not requesting technical assistance at this time. As work progresses on the Title V Five Year Needs Assessment due July 2010 and meetings with other Oklahoma MCHB grantees in the state occur, the need for technical assistance may arise. If technical assistance is needed, Oklahoma will use the formal process to request.

**FIELD LEVEL NOTES**

None

**FORM 16**  
**STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: OK**

SP # 1

**PERFORMANCE MEASURE:**

The percent of women who have an unintended pregnancy (mistimed or unwanted) resulting in live birth.

**STATUS:**

Active

**GOAL**

To reduce the number of unintended pregnancies.

**DEFINITION**

The percent of women having an unintended pregnancy resulting in a live birth.

**Numerator:**

The annual estimated number of mistimed and unwanted pregnancies.

**Denominator:**

The annual number of live births in Oklahoma.

**Units:** 100   **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Oklahoma PRAMS, vital records

**SIGNIFICANCE**

Unintended pregnancies are at greater risk for complicated births and poor pregnancy outcomes including infant mortality, birth defects, low birth weight, child abuse and dependency on welfare.

SP # 3

PERFORMANCE MEASURE:	The percent of adolescents grades 9-12 smoking tobacco products
STATUS:	Active
GOAL	To decrease the incidence of tobacco use and the resultant disease and death attributable to exposure to tobacco products among adolescents.
DEFINITION	<p>The proportion of 9th through 12th graders smoking will be obtained data from the Oklahoma Statewide Youth Risk Behavior Survey. The proportion of students saying they smoked at least one or more cigarettes daily for the past 30 days will be considered smokers.</p> <p><b>Numerator:</b> The number of 9th through 12th grade students who report smoking cigarettes daily times.</p> <p><b>Denominator:</b> The total number of 9th through 12th grade students surveyed.</p> <p><b>Units:</b> 100   <b>Text:</b> Percent</p>

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES	Oklahoma Statewide Youth Risk Behavior Survey (YRBS).
SIGNIFICANCE	Cigarette smoking is the single most preventable cause of death in the United States. It has been estimated that one in five deaths is caused by tobacco use. Studies have shown the vast majority of smokers start before 18 years of age.



SP # 4

**PERFORMANCE MEASURE:**

The number of families with a child with special health care needs receiving respite care provided through the CSHCN program.

**STATUS:**

Active

**GOAL**

To increase the number of families with a child with special health care needs receiving respite care provided through the CSHCN program.

**DEFINITION**

The number of families with a child with special health care needs receiving respite care provided through the CSHCN program.

**Numerator:**

n/a

**Denominator:**

n/a

**Units:** Yes **Text:** Text

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Claim payment records

**SIGNIFICANCE**

Respite care is the issue that is brought up at every Block Grant hearing as a need. By providing respite care you are lowering the risk of that child being institutionalized.

SP # 6

**PERFORMANCE MEASURE:**

The extent to which the MCH program area develops and maintains the capacity to access and link health-related data relevant to targeted MCH populations.

**STATUS:**

Active

**GOAL**

To improve MCH data capacity by collecting, linking, and analyzing relevant health data to inform key policy and program decisions.

**DEFINITION**

The degree that MCH cultivates data access and implements and sustains linking activities to increase data capacity to further analyses and guide policy and program development. Progress for this measure will be referred to Form 19 Health Systems Capacity Indicator #09A, which outlines key elements for expanding data capacity. Success is measured by direct access to and linking of targeted data streams (e.g., Medicaid data, vital statistics, WIC, newborn screening, birth defects) by ranking on a scale of 1-3, with 3 the ideal case in which the MCH Program area has the ability to avail itself of data for analysis and linking purposes. Each element will be individually scored. Single scores are summed across items to yield a total score purported to indicate the extent to which data capacity has been achieved. Higher overall scores reveal greater levels of data capacity.

**Numerator:**

N/A

**Denominator:**

N/A

**Units:** Yes **Text:** Text

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Oklahoma vital statistics; newborn screening data; direct client services database, Public Health Oklahoma Information System (PHOCIS); MCH surveillance data, PRAMS and TOTS; Medicaid claims and eligibility data

**SIGNIFICANCE**

Bringing together key health-related information systems will strengthen policy and program decisions by permitting public health professional to make informed judgments about the allocation of limited resources. Linked data will provide a more comprehensive assessment of health care and health status among MCH populations.

SP # 7

**PERFORMANCE MEASURE:**

The percent of Medicaid eligible children with special health care needs who report receiving routine dental care.

**STATUS:**

Active

**GOAL**

To determine the percentage of Medicaid-eligible children with special health care needs receiving routine dental care.

**DEFINITION**

The percent of Medicaid eligible children with special health care needs who report receiving routine dental care.

**Numerator:**

The number of CSHCN adolescents who have a paid Medicaid claim for routine dental care.

**Denominator:**

The number of CSHCN adolescents, which includes those children classified as disabled by the CSHCN program and those in OKDHS custody, but not classified as disabled.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

CSHCN program data, Oklahoma Department of Human Services. Medicaid program claims data, Oklahoma Health Care Authority.

**SIGNIFICANCE**

Past experience in recent years has suggested insufficient access to routine dental care for children with special health care needs. At present, only anecdotal evidence is available to substantiate this perception. Information gathered for this performance measure will provide the State with documentary evidence. Furthermore, this information will be used by the Oral Health Coalition and inform recommendations for the Oral Health Forum. This will enable the State to target geographic areas of need.

SP # 8

**PERFORMANCE MEASURE:**

The percent of adolescents grades 9-12 not using alcohol during the past 30 days.

**STATUS:**

Active

**GOAL**

To increase the percentage of adolescents not using alcohol during the past 30 days.

**DEFINITION**

The percent of adolescents grades 9-12 that refrain from the current use of alcohol.

**Numerator:**

The number of adolescents grades 9-12 that report no use of alcohol in the past 30 days on the Oklahoma Youth Risk Behavior Survey (YRBS).

**Denominator:**

The number of adolescents grades 9-12 that respond to the Oklahoma Youth Risk Behavior Survey (YRBS).

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

26.9 Increase the age and proportion of adolescents who remain alcohol and drug free.

**DATA SOURCES AND DATA ISSUES**

Oklahoma statewide Youth Risk Behavior Survey

**SIGNIFICANCE**

Substance abuse is a pervasive public health problem. Alcohol use and related problems are common among adolescents. A larger proportion of adolescents that initiate drinking early develop alcohol dependence later in life. Long-term heavy drinking has severe health risks: high blood pressure, heart arrhythmias, stroke. Heavy drinking has been linked to certain forms of cancer. Alcohol use is associated with injuries and deaths from motor vehicle crashes, falls, and drownings. It is also associated with homicide, suicide, and child abuse.

PERFORMANCE MEASURE:	The percent of adolescents overweight and obese (greater than or equal to 85th percentile of gender-specific body mass index [BMI] distribution
STATUS:	Active
GOAL	To reduce the proportion of adolescents overweight and obese.
DEFINITION	<p>The percent of adolescents overweight and obese.</p> <p><b>Numerator:</b> The number of adolescents overweight and obese responding to the statewide Oklahoma Youth Risk Behavior Survey.</p> <p><b>Denominator:</b> The total number of adolescents responding to the statewide Oklahoma Youth Risk Behavior Survey.</p> <p><b>Units:</b> 100   <b>Text:</b> Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	Objective 19-3c. Reduce the proportion of children and adolescents who are overweight or obese.
DATA SOURCES AND DATA ISSUES	Oklahoma school-based Youth Risk Behavior Survey
SIGNIFICANCE	Overweight and obesity elevate the risk of a number of illnesses including hypertension, high cholesterol, diabetes, cardiovascular disease, and a number of cancer types.

SP # 11

**PERFORMANCE MEASURE:**

The percentage of full-term infants who are put to sleep on their backs.

**STATUS:**

Active

**GOAL**

To increase the percentage of healthy full-term infants who are put to sleep on their backs.

**DEFINITION**

The percentage of infants born after 37+ weeks gestation who are most often put to sleep on their backs by their mothers.

**Numerator:**

The weighted number of infants born after 37+ weeks gestation who are most often laid to sleep on their backs by their mothers, as reported by the Oklahoma Pregnancy Risk Assessment Monitoring System Survey.

**Denominator:**

The weighted number of mothers delivering live births after 37+ weeks gestation who responded to the statewide Oklahoma Pregnancy Risk Assessment Monitoring System Survey.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

Objective 16-13.

Increase the percentage of healthy full-term infants who are put down to sleep on their backs.

**DATA SOURCES AND DATA ISSUES**

Oklahoma Pregnancy Risk Assessment Monitoring System Survey

**SIGNIFICANCE**

Research has shown that healthy full-term infants are at significantly decreased risk of Sudden Infant Death Syndrome when put to sleep on their backs.

**FORM NOTES FOR FORM 16**

None

**FIELD LEVEL NOTES**

None

**FORM 17**  
**HEALTH SYSTEMS CAPACITY INDICATORS**  
**FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA**  
**STATE: OK**

**Form Level Notes for Form 17**

None

**HEALTH SYSTEMS CAPACITY MEASURE # 01**

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	<u>Annual Indicator Data</u>				
	2004	2005	2006	2007	2008
Annual Indicator	49.2	34.2	33.7	37.2	37.2
Numerator	1,156	857	858	971	971
Denominator	234,935	250,522	254,718	260,901	260,901

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Sources: 2008 data is not yet available. 2007 discharge data from Health Care Information, OSDH used for numerator, U.S. Census Bureau 2007 population estimate for denominator.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Sources: No. of discharges in 2007 from Health Care Information, OSDH used for numerator, U.S. Census Bureau 2007 population estimate for denominator.

3. **Section Number:** Form17\_Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Sources: No. of discharges in 2006 from Health Care Information, OSDH used for numerator, U.S. Census Bureau 2006 population estimate for denominator.



**HEALTH SYSTEMS CAPACITY MEASURE # 02**

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>84.1</u>	<u>85.8</u>	<u>88.4</u>	<u>87.9</u>	<u>88.7</u>
<b>Numerator</b>	<u>28,666</u>	<u>30,192</u>	<u>31,690</u>	<u>33,539</u>	<u>33,161</u>
<b>Denominator</b>	<u>34,074</u>	<u>35,197</u>	<u>35,862</u>	<u>38,156</u>	<u>37,389</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #02

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: OHCA CMS-416 EPSDT report, Federal Fiscal Year 2008.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #02

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Oklahoma Health Care Authority.

3. **Section Number:** Form17\_Health Systems Capacity Indicator #02

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: Oklahoma Health Care Authority.

**HEALTH SYSTEMS CAPACITY MEASURE # 03**

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>82.9</u>	<u>69.5</u>	<u>72.3</u>	<u>70.9</u>	<u>72.1</u>
<b>Numerator</b>	<u>1,230</u>	<u>1,637</u>	<u>1,826</u>	<u>1,728</u>	<u>1,543</u>
<b>Denominator</b>	<u>1,483</u>	<u>2,355</u>	<u>2,527</u>	<u>2,436</u>	<u>2,139</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

- Section Number:** Form17\_Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Source: OHCA data warehouse extract 5/19/2009, Federal Fiscal Year 2008.
- Section Number:** Form17\_Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: Oklahoma Health Care Authority.
- Section Number:** Form17\_Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: Oklahoma Health Care Authority.

**HEALTH SYSTEMS CAPACITY MEASURE # 04**

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>70.8</u>	<u>71.5</u>	<u>66.4</u>	<u>67.2</u>	<u>69.4</u>
<b>Numerator</b>	<u>36,219</u>	<u>37,019</u>	<u>36,067</u>	<u>37,191</u>	<u>37,518</u>
<b>Denominator</b>	<u>51,157</u>	<u>51,775</u>	<u>54,306</u>	<u>55,320</u>	<u>54,047</u>

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #04

**Field Name:** HSC04

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: Health Care Information, OSDH.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #04

**Field Name:** HSC04

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Health Care Information, OSDH.

3. **Section Number:** Form17\_Health Systems Capacity Indicator #04

**Field Name:** HSC04

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: Health Care Information, OSDH.

**HEALTH SYSTEMS CAPACITY MEASURE # 07A**

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	2004	2005	<b>Annual Indicator Data</b>		
			2006	2007	2008
<b>Annual Indicator</b>	<u>77.4</u>	<u>84.3</u>	<u>85.7</u>	<u>86.8</u>	<u>86.1</u>
<b>Numerator</b>	<u>385,620</u>	<u>403,023</u>	<u>421,001</u>	<u>439,252</u>	<u>448,225</u>
<b>Denominator</b>	<u>498,031</u>	<u>478,007</u>	<u>491,517</u>	<u>506,252</u>	<u>520,410</u>

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer

than 5 and therefore a 3-year moving average cannot be

applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**1. **Section Number:** Form17\_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: OHCA data warehouse extract 5/19/2009, Federal Fiscal Year 2008.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Oklahoma Health Care Authority.

3. **Section Number:** Form17\_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: Oklahoma Health Care Authority.

**HEALTH SYSTEMS CAPACITY MEASURE # 07B**

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	2004	2005	<b>Annual Indicator Data</b>		2008
			2006	2007	
<b>Annual Indicator</b>	<u>40.4</u>	<u>47.3</u>	<u>51.0</u>	<u>53.6</u>	<u>54.3</u>
<b>Numerator</b>	<u>36,862</u>	<u>45,222</u>	<u>51,019</u>	<u>55,408</u>	<u>57,581</u>
<b>Denominator</b>	<u>91,164</u>	<u>95,686</u>	<u>100,011</u>	<u>103,319</u>	<u>106,022</u>

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer

than 5 and therefore a 3-year moving average cannot be

applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: OHCA data warehouse extract 5/19/2009, Federal Fiscal Year 2008.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Oklahoma Health Care Authority, the State's Medicaid agency.

3. **Section Number:** Form17\_Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: Oklahoma Health Care Authority, the State's Medicaid agency.

**HEALTH SYSTEMS CAPACITY MEASURE # 08**

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>70.2</u>	<u>69.0</u>	<u>68.2</u>	<u>69.1</u>	<u>69.9</u>
<b>Numerator</b>	<u>7,217</u>	<u>7,772</u>	<u>8,251</u>	<u>8,843</u>	<u>9,711</u>
<b>Denominator</b>	<u>10,282</u>	<u>11,258</u>	<u>12,102</u>	<u>12,805</u>	<u>13,883</u>

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer

than 5 and therefore a 3-year moving average cannot be

applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: Oklahoma Department of Human Services, CSHCN Program.

Per CSHCN Program - Denominator data for 2008 is an estimate based on the known number of SSI recipients under 18 years of age.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Oklahoma Department of Human Services, CSHCN Program.

Per CSHCN Program - Denominator data for 2007 is an estimate based on the known number of SSI recipients under 18 years of age.

3. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: Oklahoma Department of Human Services, CSHCN Program.

Per CSHCN Program - Denominator data for 2006 have not been published to date; therefore, a projection, which reflects a 7.5% increase from previous year's reporting, has been used.

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #05**  
**(MEDICAID AND NON-MEDICAID COMPARISON)**  
**STATE: OK**

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (&lt; 2,500 grams)</i>	2007	Other	<u>8</u>	<u>6.2</u>	<u>7.3</u>
b) <i>Infant deaths per 1,000 live births</i>	2006	Other	<u>7.6</u>	<u>7.6</u>	<u>7.6</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2007	Other	<u>74</u>	<u>93.2</u>	<u>84.1</u>
d) <i>Percent of pregnant women with adequate prenatal care(observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2007	Other	<u>72.3</u>	<u>83</u>	<u>76.6</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)**  
**STATE: OK**

<b>INDICATOR #06</b> <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	<b>YEAR</b>	<b>PERCENT OF POVERTY LEVEL MEDICAID</b> (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2008	<u>185</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>5</u> ) (Age range <u>6</u> to <u>12</u> ) (Age range <u>13</u> to <u>18</u> )	2008	<u>185</u> <u>185</u> <u>185</u>
c) <i>Pregnant Women</i>	2008	<u>185</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)**  
**STATE: OK**

<b>INDICATOR #06</b> <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	<b>YEAR</b>	<b>PERCENT OF POVERTY LEVEL SCHIP</b>
a) <i>Infants (0 to 1)</i>	2008	<u>185</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>5</u> ) (Age range <u>6</u> to <u>12</u> ) (Age range <u>13</u> to <u>18</u> )	2008	<u>185</u> <u>185</u> <u>185</u>
c) <i>Pregnant Women</i>	2008	<u>185</u>



## FORM NOTES FOR FORM 18

None

### FIELD LEVEL NOTES

1. **Section Number:** Form18\_Indicator 06 - Medicaid  
**Field Name:** Med\_Infant  
**Row Name:** Infants  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: Oklahoma Health Care Authority.
2. **Section Number:** Form18\_Indicator 06 - Medicaid  
**Field Name:** Med\_Children  
**Row Name:** Medicaid Children  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: Oklahoma Health Care Authority.
3. **Section Number:** Form18\_Indicator 06 - Medicaid  
**Field Name:** Med\_Women  
**Row Name:** Pregnant Women  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: Oklahoma Health Care Authority.
4. **Section Number:** Form18\_Indicator 06 - SCHIP  
**Field Name:** SCHIP\_Infant  
**Row Name:** Infants  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: Oklahoma Health Care Authority.
5. **Section Number:** Form18\_Indicator 06 - SCHIP  
**Field Name:** SCHIP\_Children  
**Row Name:** SCHIP Children  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: Oklahoma Health Care Authority.
6. **Section Number:** Form18\_Indicator 06 - SCHIP  
**Field Name:** SCHIP\_Women  
**Row Name:** Pregnant Women  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: Oklahoma Health Care Authority.
7. **Section Number:** Form18\_Indicator 05  
**Field Name:** LowBirthWeight  
**Row Name:** Percent of ow birth weight (<2,500 grams)  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: 2007 Pregnancy Risk Assessment Monitoring System.
8. **Section Number:** Form18\_Indicator 05  
**Field Name:** InfantDeath  
**Row Name:** Infant deaths per 1,000 live births  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: OSDH death records. 2007 linked Medicaid/death records not available yet.
9. **Section Number:** Form18\_Indicator 05  
**Field Name:** CareFirstTrimester  
**Row Name:** Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: OSDH death records.
10. **Section Number:** Form18\_Indicator 05  
**Field Name:** AdequateCare  
**Row Name:** Percent of pregnant women with adequate prenatal care  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: Pregnancy Risk Assessment Monitoring System 2007.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: OK**

**HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)**  
*(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)*

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
<b>ANNUAL DATA LINKAGES</b>		
Annual linkage of infant birth and infant death certificates	2	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	2	Yes
Annual linkage of birth certificates and WIC eligibility files	1	No
Annual linkage of birth certificates and newborn screening files	1	No
<b>REGISTRIES AND SURVEYS</b>		
Hospital discharge survey for at least 90% of in-State discharges	3	No
Annual birth defects surveillance system	3	No
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

\*Where:

1 = No, the MCH agency does not have this ability.

2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.

3 = Yes, the MCH agency always has this ability.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: OK**

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Other:		

\*Where:  
1 = No  
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.  
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

<b>Notes:</b>
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

**FORM NOTES FOR FORM 19**

None

**FIELD LEVEL NOTES**

None

**FORM 20**  
**HEALTH STATUS INDICATORS #01-#05**  
**MULTI-YEAR DATA**  
**STATE: OK**

**Form Level Notes for Form 11**

None

**HEALTH STATUS INDICATOR MEASURE # 01A**

The percent of live births weighing less than 2,500 grams.

	<u>Annual Indicator Data</u>				
	2004	2005	2006	2007	2008
Annual Indicator	8.0	8.0	8.4	8.2	8.3
Numerator	4,097	4,143	4,509	4,481	4,456
Denominator	51,115	51,746	53,985	54,898	53,693

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

**1. Section Number:** Form20\_Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: Oklahoma State Department of Health, Center for Health Statistics, Vital Records Division.

**2. Section Number:** Form20\_Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Oklahoma State Department of Health, Center for Health Statistics, Vital Records Division.

**3. Section Number:** Form20\_Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: Oklahoma State Department of Health, Center for Health Statistics, Vital Records Division.

**HEALTH STATUS INDICATOR MEASURE # 01B**

The percent of live singleton births weighing less than 2,500 grams.

		<b>Annual Indicator Data</b>			
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>6.6</u>	<u>6.4</u>	<u>6.8</u>	<u>6.6</u>	<u>6.6</u>
<b>Numerator</b>	<u>3,271</u>	<u>3,221</u>	<u>3,587</u>	<u>3,533</u>	<u>3,533</u>
<b>Denominator</b>	<u>49,692</u>	<u>50,190</u>	<u>52,451</u>	<u>53,354</u>	<u>53,354</u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
<b>Is the Data Provisional or Final?</b>				Final	Provisional

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Health Care Information, OSDH. 2007 data used as a provisional estimate.

**2. Section Number:** Form20\_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Health Care Information, OSDH.

**3. Section Number:** Form20\_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: Health Care Information, OSDH.

**HEALTH STATUS INDICATOR MEASURE # 02A**

The percent of live births weighing less than 1,500 grams.

		Annual Indicator Data				
	2004	2005	2006	2007	2008	
Annual Indicator	1.3	1.4	1.6	1.5	1.4	
Numerator	649	743	866	798	760	
Denominator	51,115	51,746	53,985	54,898	53,693	
Check this box if you cannot report the numerator because						
1. There are fewer than 5 events over the last year, and						
2. The average number of events over the last 3 years is fewer						
than 5 and therefore a 3-year moving average cannot be						
applied.						
(Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?				Final	Provisional	

**Field Level Notes**

- Section Number:** Form20\_Health Status Indicator #02A  
**Field Name:** HSI02A  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
Source: Health Care Information, OSDH.
- Section Number:** Form20\_Health Status Indicator #02A  
**Field Name:** HSI02A  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Source: Health Care Information, OSDH.
- Section Number:** Form20\_Health Status Indicator #02A  
**Field Name:** HSI02A  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Source: Health Care Information, OSDH.

**HEALTH STATUS INDICATOR MEASURE # 02B**

The percent of live singleton births weighing less than 1,500 grams.

		<b>Annual Indicator Data</b>			
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>1.0</u>	<u>1.2</u>	<u>1.3</u>	<u>1.1</u>	<u>1.1</u>
<b>Numerator</b>	<u>519</u>	<u>585</u>	<u>664</u>	<u>603</u>	<u>603</u>
<b>Denominator</b>	<u>49,692</u>	<u>50,190</u>	<u>52,451</u>	<u>53,354</u>	<u>53,354</u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
<b>Is the Data Provisional or Final?</b>				Final	Provisional

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2008**Field Note:**

Source: Health Care Information, OSDH.

**2. Section Number:** Form20\_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2007**Field Note:**

Source: Health Care Information, OSDH.

**3. Section Number:** Form20\_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2006**Field Note:**

Source: Health Care Information, OSDH.



**HEALTH STATUS INDICATOR MEASURE # 03A**

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	13.0	13.9	15.9	14.0	14.0
<b>Numerator</b>	95	102	117	104	104
<b>Denominator</b>	733,102	733,927	736,421	745,170	745,170

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

**1. Section Number:** Form20\_Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: 2007 death numbers from Health Care Information, OSDH, for numerator, Census Bureau July 1, 2007 OK population estimates for denominator.

Since 2008 data is not yet available for the numerator and denominator, 2007 death and Census data is used as an estimate.

**2. Section Number:** Form20\_Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: 2007 death numbers from Health Care Information, OSDH, for numerator, Census Bureau July 1, 2007 OK population estimates for denominator.

**3. Section Number:** Form20\_Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: 2006 death numbers from Health Care Information, OSDH, for numerator, Census Bureau July 1, 2006 OK population estimates for denominator.

**HEALTH STATUS INDICATOR MEASURE # 03B**

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>5.6</u>	<u>4.6</u>	<u>6.7</u>	<u>5.9</u>	<u>5.9</u>
<b>Numerator</b>	<u>41</u>	<u>34</u>	<u>49</u>	<u>44</u>	<u>44</u>
<b>Denominator</b>	<u>733,102</u>	<u>733,927</u>	<u>736,421</u>	<u>745,170</u>	<u>745,170</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #03B

**Field Name:** HSI03B

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: 2007 death numbers from Health Care Information, OSDH, for numerator, Census Bureau July 1, 2007 OK population estimates for denominator.

Since 2008 data is not yet available for the numerator and denominator, 2007 death and Census data is used as an estimate.

**2. Section Number:** Form20\_Health Status Indicator #03B

**Field Name:** HSI03B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: 2007 death numbers from Health Care Information, OSDH, for numerator, Census Bureau July 1, 2007 OK population estimates for denominator.

**3. Section Number:** Form20\_Health Status Indicator #03B

**Field Name:** HSI03B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: 2006 death numbers from Health Care Information, OSDH, for numerator, Census Bureau July 1, 2006 OK population estimates for denominator.

**HEALTH STATUS INDICATOR MEASURE # 03C**

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2004	2005	<b>Annual Indicator Data</b>		2008
			2006	2007	
<b>Annual Indicator</b>	38.5	36.0	38.5	33.8	33.8
<b>Numerator</b>	198	190	202	177	177
<b>Denominator</b>	514,379	527,537	524,450	523,251	523,251

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

**1. Section Number:** Form20\_Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: 2007 death numbers from Health Care Information, OSDH, for numerator, Census Bureau July 1, 2007 OK population estimates for denominator.

Since 2008 data is not yet available for the numerator and denominator, 2007 death and Census data is used as an estimate.

**2. Section Number:** Form20\_Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: 2007 death numbers from Health Care Information, OSDH, for numerator, Census Bureau July 1, 2007 OK population estimates for denominator.

**3. Section Number:** Form20\_Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: 2006 death numbers from Health Care Information, OSDH, for numerator, Census Bureau July 1, 2006 OK population estimates for denominator.

**HEALTH STATUS INDICATOR MEASURE # 04A**

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>340.7</u>	<u>340.7</u>	<u>340.7</u>	<u>253.9</u>	<u>253.9</u>
<b>Numerator</b>	<u>2,498</u>	<u>2,498</u>	<u>2,498</u>	<u>1,892</u>	<u>1,892</u>
<b>Denominator</b>	<u>733,102</u>	<u>733,102</u>	<u>733,102</u>	<u>745,170</u>	<u>745,170</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Form20\_Health Status Indicator #04A

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: 2008 injury data not available, therefore 2007 data is used as a provisional estimate.

2. **Section Number:** Form20\_Health Status Indicator #04A

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: Oklahoma inpatient hospital discharge data, 2007, Health Care Information Division, OSDH, for numerator. U.S. Census Bureau July 1, 2007 OK population estimates for denominator.

3. **Section Number:** Form20\_Health Status Indicator #04A

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: 2006 injury data not available. 2003 nonfatal injury numbers from Health Care Information, OSDH, for numerator, Census Bureau July 1, 2003 OK population estimates for denominator.

**HEALTH STATUS INDICATOR MEASURE # 04B**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>491.5</u>	<u>427.7</u>	<u>440.4</u>	<u>440.4</u>	<u>440.4</u>
<b>Numerator</b>	<u>3,603</u>	<u>3,139</u>	<u>3,258</u>	<u>3,258</u>	<u>3,258</u>
<b>Denominator</b>	<u>733,102</u>	<u>733,927</u>	<u>739,762</u>	<u>739,762</u>	<u>739,762</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

1. **Section Number:** Form20\_Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: 2008 injury data not available. 2006 injury numbers for numerator from Oklahoma Dept of Public Safety. July 1, 2006 OK population estimates for denominator from Census Bureau.

2. **Section Number:** Form20\_Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: 2007 injury data not available. 2006 injury numbers for numerator from Oklahoma Dept of Public Safety. July 1, 2006 OK population estimates for denominator from Census Bureau.

3. **Section Number:** Form20\_Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: 2006 injury numbers for numerator from Oklahoma Dept of Public Safety. July 1, 2006 OK population estimates for denominator from Census Bureau.

**HEALTH STATUS INDICATOR MEASURE # 04C**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>2,760.5</u>	<u>2,536.9</u>	<u>2,292.2</u>	<u>2,292.2</u>	<u>2,292.2</u>
<b>Numerator</b>	<u>14,282</u>	<u>13,383</u>	<u>13,450</u>	<u>13,450</u>	<u>13,450</u>
<b>Denominator</b>	<u>517,379</u>	<u>527,537</u>	<u>586,769</u>	<u>586,769</u>	<u>586,769</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

1. **Section Number:** Form20\_Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: 2008 injury data not available. 2006 injury numbers for ages 15-25 for numerator from Oklahoma Dept of Public Safety. July 1, 2006 OK population estimates for ages 15-25 for denominator from Census Bureau.

2. **Section Number:** Form20\_Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: 2007 injury data not available. 2006 injury numbers for ages 15-25 for numerator from Oklahoma Dept of Public Safety. July 1, 2006 OK population estimates for ages 15-25 for denominator from Census Bureau.

3. **Section Number:** Form20\_Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: 2006 injury numbers for ages 15-25 for numerator from Oklahoma Dept of Public Safety. July 1, 2006 OK population estimates for ages 15-25 for denominator from Census Bureau.

**HEALTH STATUS INDICATOR MEASURE # 05A**

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>32.0</u>	<u>30.3</u>	<u>31.5</u>	<u>29.8</u>	<u>29.8</u>
<b>Numerator</b>	<u>3,335</u>	<u>3,649</u>	<u>3,838</u>	<u>3,661</u>	<u>3,661</u>
<b>Denominator</b>	<u>104,222</u>	<u>120,619</u>	<u>121,799</u>	<u>122,723</u>	<u>122,723</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Form20\_Health Status Indicator #05A

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: HIV/STD Service, OSDH for numerator, July 1, 2007 Census Bureau estimate for denominator. 2008 chlamydia data not available, hence 2007 data is used as a provisional estimate.

2. **Section Number:** Form20\_Health Status Indicator #05A

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: HIV/STD Service, OSDH for numerator, July 1, 2007 Census Bureau estimate for denominator.

3. **Section Number:** Form20\_Health Status Indicator #05A

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: HIV/STD Service, OSDH for numerator, July 1, 2006 Census Bureau estimate for denominator.

**HEALTH STATUS INDICATOR MEASURE # 05B**

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>7.9</u>	<u>9.1</u>	<u>9.2</u>	<u>9.0</u>	<u>9.0</u>
<b>Numerator</b>	<u>4,723</u>	<u>5,443</u>	<u>5,514</u>	<u>5,399</u>	<u>5,399</u>
<b>Denominator</b>	<u>597,991</u>	<u>595,576</u>	<u>601,498</u>	<u>602,273</u>	<u>602,273</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Form20\_Health Status Indicator #05B

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source: HIV/STD Service, OSDH for numerator, July 1, 2007 Census Bureau estimate for denominator. 2008 chlamydia data not available, hence 2007 data is used as a provisional estimate.

2. **Section Number:** Form20\_Health Status Indicator #05B

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source: HIV/STD Service, OSDH for numerator, July 1, 2007 Census Bureau estimate for denominator.

3. **Section Number:** Form20\_Health Status Indicator #05B

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: HIV/STD Service, OSDH for numerator, July 1, 2006 Census Bureau estimate for denominator.



**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: OK**

**HSI #06A - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Provisional

<b>CATEGORY TOTAL POPULATION BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	55,590	38,638	5,567	4,909	1,076	80	5,320	0
Children 1 through 4	210,957	151,040	20,249	21,179	3,217	322	14,950	0
Children 5 through 9	248,202	180,201	24,005	23,742	3,772	376	16,106	0
Children 10 through 14	239,121	172,213	23,973	24,656	3,805	291	14,183	0
Children 15 through 19	251,880	180,993	26,382	27,256	3,775	277	13,197	0
Children 20 through 24	270,201	198,736	26,424	26,452	6,317	317	11,955	0
Children 0 through 24	1,275,951	921,821	126,600	128,194	21,962	1,663	75,711	0

**HSI #06B - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

<b>CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	47,988	7,602	0
Children 1 through 4	178,896	32,061	0
Children 5 through 9	215,744	32,458	0
Children 10 through 14	213,592	25,529	0
Children 15 through 19	229,371	22,509	0
Children 20 through 24	247,792	22,409	0
Children 0 through 24	1,133,383	142,568	0

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: OK**

**HSI #07A - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2008    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL LIVE BIRTHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Women < 15	89	48	24	15	0	2	0	0
Women 15 through 17	2,268	1,515	333	400	0	20	0	0
Women 18 through 19	5,120	3,553	660	862	2	43	0	0
Women 20 through 34	41,871	32,395	3,727	4,839	91	819	0	0
Women 35 or older	4,385	3,499	300	312	37	237	0	0
Women of all ages	53,733	41,010	5,044	6,428	130	1,121	0	0

**HSI #07B - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

<b>CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Women < 15	63	26	0
Women 15 through 17	1,800	464	4
Women 18 through 19	4,427	687	6
Women 20 through 34	36,625	5,197	49
Women 35 or older	3,754	623	8
Women of all ages	46,669	6,997	67

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: OK**

**HSI #08A - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Provisional

<b>CATEGORY TOTAL DEATHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	422	254	80	49	1	1	0	37
Children 1 through 4	98	62	10	12	2	0	0	12
Children 5 through 9	46	26	8	9	1	0	0	2
Children 10 through 14	64	42	8	9	1	0	0	4
Children 15 through 19	260	164	34	41	2	0	0	19
Children 20 through 24	321	206	40	46	3	2	0	24
Children 0 through 24	1,211	754	180	166	10	3	0	98

**HSI #08B - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

<b>CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	342	49	4
Children 1 through 4	80	17	1
Children 5 through 9	40	3	0
Children 10 through 14	55	6	0
Children 15 through 19	223	25	0
Children 20 through 24	275	24	7
Children 0 through 24	1,015	124	12

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: OK**

**HSI #09A - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

<b>CATEGORY Miscellaneous Data BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>	<b>Specific Reporting Year</b>
All children 0 through 19	1,005,750	723,085	100,176	101,742	15,645	1,346	63,756	0	2008
Percent in household headed by single parent	32.9	26.9	67.0	36.2	16.6	0.0	43.4	33.8	2006
Percent in TANF (Grant) families	1.6	0.9	5.5	2.0	0.8	0.0	0.0	0.0	2008
Number enrolled in Medicaid	514,441	349,553	79,432	69,532	6,379	495	9,050	0	2008
Number enrolled in SCHIP	114,322	83,540	11,473	16,258	1,676	70	1,305	0	2008
Number living in foster home care	10,427	5,622	2,720	2,037	48	0	0	0	2008
Number enrolled in food stamp program	390,047	256,812	77,307	52,321	3,607	0	0	0	2008
Number enrolled in WIC	189,763	136,319	22,900	2,058	13,164	884	14,438	0	2008
Rate (per 100,000) of juvenile crime arrests	2,169.3	1,957.3	6,090.3	1,403.6	869.3	0.0	0.0	0.0	2008
Percentage of high school drop-outs (grade 9 through 12)	2.9	2.6	3.3	3.0	2.2	0.0	0.0	0.0	2008

**HSI #09B - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

<b>CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>	<b>Specific Reporting Year</b>
All children 0 through 19	885,591	120,159	0	2008
Percent in household headed by single parent	26.5	33.8	0.0	2006
Percent in TANF (Grant) families	1.6	1.7	0.0	2008
Number enrolled in Medicaid	441,250	73,191	0	2008
Number enrolled in SCHIP	97,748	16,574	0	2008
Number living in foster home care	10,427	1,681	0	2008
Number enrolled in food stamp program	390,047	25,350	0	2008
Number enrolled in WIC	136,885	52,878	0	2008
Rate (per 100,000) of juvenile crime arrests	2,251.8	1,561.3	0.0	2008
Percentage of high school drop-outs (grade 9 through 12)	2.8	4.8	0.0	2008

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: OK**

**HSI #10 - Demographics (Geographic Living Area)** *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2008    Is this data from a State Projection? No    Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	655,482
Living in urban areas	662,626
Living in rural areas	332,765
Living in frontier areas	10,359
<b>Total - all children 0 through 19</b>	<b>1,005,750</b>

**Note:**

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: OK**

**HSI #11 - Demographics (Poverty Levels)** *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2008    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	3,642,361.0
Percent Below: 50% of poverty	5.0
100% of poverty	13.4
200% of poverty	36.3

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: OK**

**HSI #12 - Demographics (Poverty Levels)** *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2008    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	1,005,750.0
Percent Below: 50% of poverty	7.5
100% of poverty	18.8
200% of poverty	45.3

## FORM NOTES FOR FORM 21

None

### FIELD LEVEL NOTES

1. **Section Number:** Form21\_Indicator 09A  
**Field Name:** HSIRace\_MedicaidNo  
**Row Name:** Number enrolled in Medicaid  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: OHCA data warehouse extract 5/19/2009, Federal Fiscal Year 2008.
2. **Section Number:** Form21\_Indicator 09A  
**Field Name:** HSIRace\_SCHIPNo  
**Row Name:** Number enrolled in SCHIP  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: OHCA data warehouse extract 5/19/2009, Federal Fiscal Year 2008.
3. **Section Number:** Form21\_Indicator 09A  
**Field Name:** HSIRace\_WICNo  
**Row Name:** Number enrolled in WIC  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: Oklahoma State Department of Health - WIC.
4. **Section Number:** Form21\_Indicator 09B  
**Field Name:** HSIEthnicity\_MedicaidNo  
**Row Name:** Number enrolled in Medicaid  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: OHCA data warehouse extract 5/19/2009, Federal Fiscal Year 2008.
5. **Section Number:** Form21\_Indicator 09B  
**Field Name:** HSIEthnicity\_SCHIPNo  
**Row Name:** Number enrolled in SCHIP  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: OHCA data warehouse extract 5/19/2009, Federal Fiscal Year 2008.
6. **Section Number:** Form21\_Indicator 09B  
**Field Name:** HSIEthnicity\_WICNo  
**Row Name:** Number enrolled in WIC  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: Oklahoma State Department of Health - WIC.
7. **Section Number:** Form21\_Indicator 10  
**Field Name:** Metropolitan  
**Row Name:** Living in metropolitan areas  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: U.S. Census Bureau. Metropolitan population calculated from July 1, 2008 population estimate of children 0-19 years of age residing in Oklahoma MSA counties.
8. **Section Number:** Form21\_Indicator 10  
**Field Name:** Urban  
**Row Name:** Living in urban areas  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: U.S. Census Bureau. Urban population calculated from total number of children 0-19 years of age residing in Oklahoma counties with July 1, 2008 population estimate > 50,000.
9. **Section Number:** Form21\_Indicator 10  
**Field Name:** Rural  
**Row Name:** Living in rural areas  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: U.S. Census Bureau. Rural population calculated from total number of children 0-19 years of age residing in Oklahoma counties with July 1, 2008 population estimate < 50,000, excluding frontier rural counties.
10. **Section Number:** Form21\_Indicator 10  
**Field Name:** Frontier  
**Row Name:** Living in frontier areas  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: U.S. Census Bureau. Frontier rural population calculated from total number of children 0-19 years of age residing in Oklahoma counties with 2008 population density < 7 people per square mile.
11. **Section Number:** Form21\_Indicator 11  
**Field Name:** S11\_total  
**Row Name:** Total Population  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: U.S. Census Bureau 7/1/2008 State Characteristics Population Estimates.

12. **Section Number:** Form21\_Indicator 11  
**Field Name:** S11\_50percent  
**Row Name:** Percent Below: 50% of poverty  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: U.S. Census Bureau Current Population Survey Annual Social and Economic Supplement 2008.
13. **Section Number:** Form21\_Indicator 11  
**Field Name:** S11\_100percent  
**Row Name:** 100% of poverty  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: U.S. Census Bureau Current Population Survey Annual Social and Economic Supplement 2008.
14. **Section Number:** Form21\_Indicator 11  
**Field Name:** S11\_200percent  
**Row Name:** 200% of poverty  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: U.S. Census Bureau Current Population Survey Annual Social and Economic Supplement 2008.
15. **Section Number:** Form21\_Indicator 12  
**Field Name:** S12\_Children  
**Row Name:** Children 0 through 19 years old  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: U.S. Census Bureau 7/1/2008 State Characteristics Population Estimates.
16. **Section Number:** Form21\_Indicator 12  
**Field Name:** S12\_50percent  
**Row Name:** Percent Below: 50% of poverty  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: U.S. Census Bureau Current Population Survey Annual Social and Economic Supplement 2008.
17. **Section Number:** Form21\_Indicator 12  
**Field Name:** S12\_100percent  
**Row Name:** 100% of poverty  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: U.S. Census Bureau Current Population Survey Annual Social and Economic Supplement 2008.
18. **Section Number:** Form21\_Indicator 12  
**Field Name:** S12\_200percent  
**Row Name:** 200% of poverty  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Source: U.S. Census Bureau Current Population Survey Annual Social and Economic Supplement 2008.